

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL & GAS

5. Lease Designation and Serial No.

ML-11004

6. If Indian, Allottee or Tribe Name

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work

DRILL ☒DEEPEN ☐PLUG BACK ☐

b. Type of Well

Oil
Well ☐Gas
Well ☒

Other

Single
Zone ☐Multiple
Zone ☐

2. Name of Operator

Wexpro Company

3. Address of Operator

P. O. Box 458, Rock Springs, Wyoming 82902

4. Location of Well (Report location clearly and in accordance with any State requirements.)*

At surface

SE SE 497' FEL, 755' FSL

At proposed prod. zone

14. Distance in miles and direction from nearest town or post office*

Approximately 36 miles south and west of Ouray, Utah

15. Distance from proposed*

location to nearest

property or lease line, ft.

(Also to nearest drlg. line, if any)

497

16. No. of acres in lease

645.79

17. No. of acres assigned
to this well

NA

18. Distance from proposed location*
to nearest well, drilling, completed,
or applied for, on this lease, ft.

2829

19. Proposed depth

6,950'

20. Rotary or cable tools

Rotary

21. Elevations (Show whether DF, RT, GR, etc.)

GR 4987'

22. Approx. date work will start*

March 1, 1986

23.

PROPOSED CASING AND CEMENTING PROGRAM

Size of Hole	Size of Casing	Weight per Foot	Setting Depth	Quantity of Cement
12-1/4	9-5/8	36	300'	165 sx Regular Type G with additives
7-7/8	5-1/2	17	6,950'	50-50 Pozmix with additives

See attached drilling plan.

NOTE: All water for drilling purposes will be obtained from a Mapco water well,
State of Utah application number 54801, permit number 49-367.APPROVED BY THE STATE
OF UTAH DIVISION OF
OIL, GAS, AND MININGDATE: 3-18-86
BY: John R. Bair
WELL SPACING: 203

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24.

Signer

C. J. Maser

Title Drilling Superintendent

Date 8-6-86

(This space for Federal or State office use)

Permit No. 43-047-31701

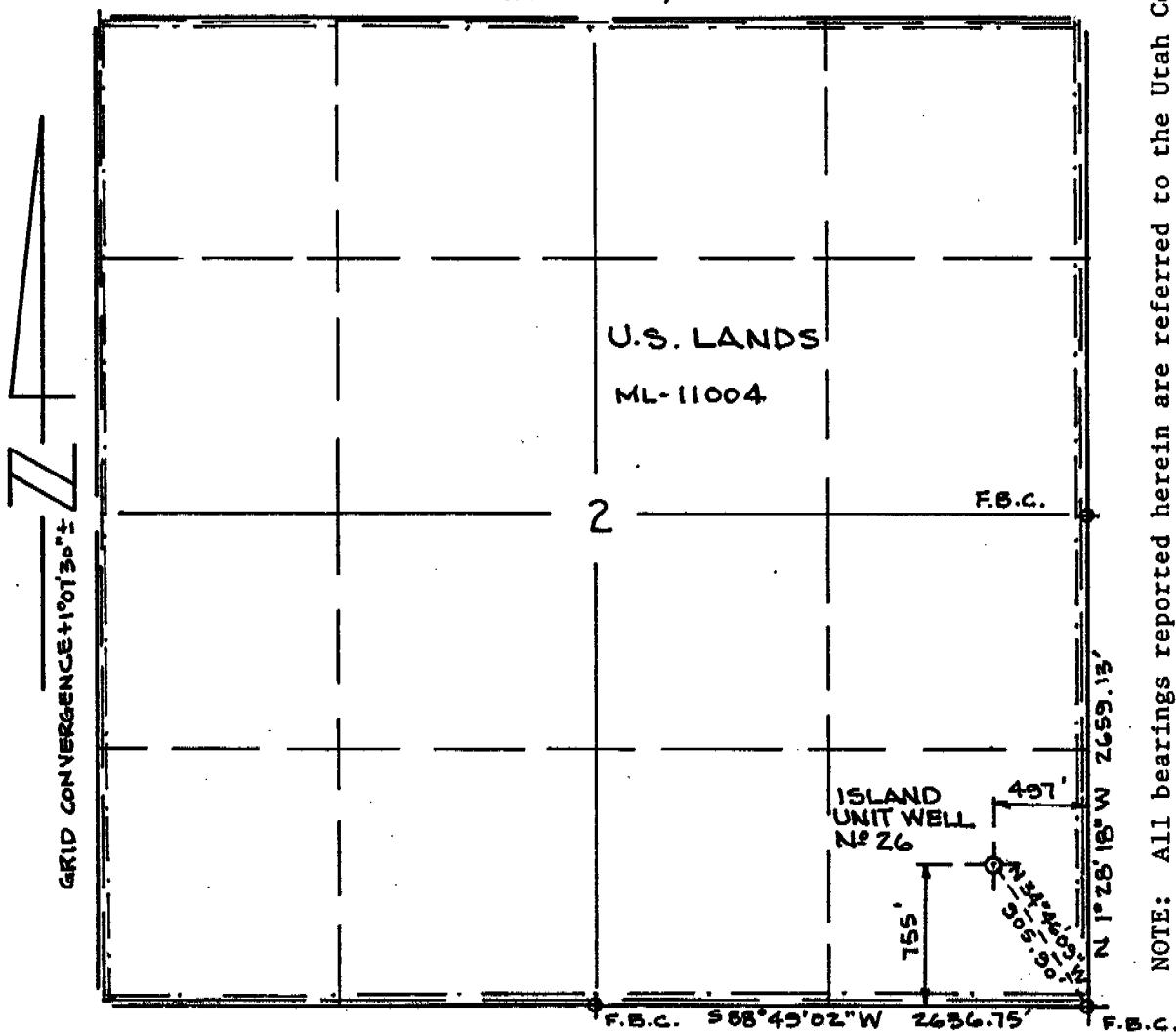
Approval Date

Approved by
Conditions of approval, if any:

Title

Date

T. 10S., R. 19E., S. 1B. & M.
 UTAH CO., UTAH



NOTE: All bearings reported herein are referred to the Utah Coordinate System, Central Zone, 1927 NAD, as determined by solar observation and convergence adjustment. GLO & BLM record bearings used for calculated intersections, if any, are rotated to grid north reference. All distances reported hereon are surface distances.

LOCATION PLAN
 SCALE 1"=1000'



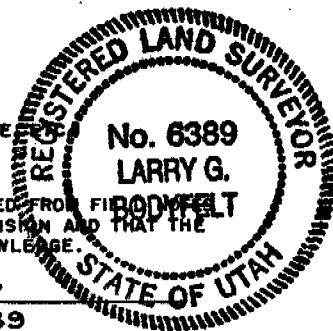
LEGEND

- SURFACE OWNER BOUNDARY
- MINERAL LEASE BOUNDARY
- ⊕ WELL LOCATION
- ⊕ FD. BRASS CAP
- ⊕ FD. STONE

NOTE: FOR SURFACE INFORMATION (ROADS, TOPO, DRAINAGE) SEE AREA MAP.

THIS IS TO CERTIFY THAT THE ABOVE PLAT WAS PREPARED FROM FIELD OF ACTUAL SURVEYS MADE BY ME OR UNDER MY SUPERVISION AND THAT THE SAME ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Larry G. Boddyfelt 2/5/86
 LARRY G. BODDYFELT, UTAH REG. L.S. No 6389



ENGINEERING RECORD		CERTIFIED WELL LOCATION PLAT FOR ISLAND UNIT WELL No 26	
SURVEYED: MKK	FIELD: ISLAND		
BASIS OF BEARING: SOLAR OBSERVATION			
SURFACE OWNER: U.S. GOVERNMENT LANDS			
MINERAL LEASE: M.L.-11004			
LOCATION: SE 1/4, SE 1/4, SEC. 2, T. 10S. R. 19E., S. 1B. & M.		DRAWN: 1-31-86 CRW CHECKED: <i>JB</i> APPROVED: <i>JB</i> 2/5/86	
497' FEL, 755 FSL			
COUNTY: UTAH	STATE: UTAH		
ELEVATION AS GRADED: 4987 FROM MAP SPOT			
ELEV. SE SEC. CORNER			
		SCALE: 1"=1000'	DRWG. NO. M-25076

DRILLING PLAN
Wexpro Company
Island Unit Well No. 26
Uintah County, Utah

1 & 2. SURFACE FORMATION, ESTIMATED TOPS AND WATER, OIL, GAS OR MINERAL BEARING FORMATIONS:

Uintah	-	Surface
Green River	-	1,850'
Birds Nest Aquifer	-	2,375'
Wasatch Tongue	-	4,470', gas or oil
Green River Tongue	-	4,815', gas or oil
Wasatch	-	4,975', gas
Chapita Wells Zone	-	5,750', objective, gas
Total Depth	-	6,950'

All fresh water and prospectively valuable minerals encountered during drilling, will be recorded by depth and adequately protected. All oil and gas shows will be tested to determined commercial potential.

3. PRESSURE CONTROL EQUIPMENT: (See attached diagram)
Operator's minimum specifications for pressure control equipment requires an 11-inch 3000 psi double gate hydraulically operated blowout preventer and an 11-inch 3000 psi annular preventer. Ram-type preventers will be tested to 2000 psi and annular preventers will be tested to 1500 psi for 15 minutes using professional testing company. NOTE: The surface casing will be pressure tested to a minimum of 1000 psi; or one psi per foot; or 70 percent of the internal yield of the casing, whichever is applicable. BOP's will be checked daily as to mechanical operating condition and will be tested after each string of casing is run. All ram type preventers will have hand wheels which will be operative at the time the preventers are installed.

BOP systems will be consistent with API RP53. Pressure tests will be conducted before drilling out from under casing strings which have been set and cemented in place. Blowout preventer controls will be installed prior to drilling the surface casing plug and will remain in use until the well is completed or abandoned. Preventers will be inspected and operated at least daily to ensure good mechanical working order, and this inspection will be recorded on the daily drilling report. Preventers will be pressure tested before drilling casing cement plugs.

4. CASING PROGRAM:

Footage	Size	Grade	Wt.	Condition	Thread	Cement
300	9-5/8	K-55	36	New	8 rd ST&C	165 sacks Regular Type G with 3% calcium chloride and 1/4-pound flocele/sack; cement will be brought to surface.
6950	5-1/2	K-55	17	New	8 rd LT&C	Cement top will be brought 1000 feet from surface with 50-50 Pozmix with 8% gel, 0.2% Halad-24, 10% salt, 5 pounds gilsonite/sack and 1/4-pound flocele/sack, plus 1000 feet 50-50 Pozmix with 2% gel, 0.6% Halad-24, 10% salt and 1/4-pound flocele/sack.

AUXILIARY EQUIPMENT:

- a) Manually operated kelly cock
- b) No floats at bit
- c) Monitoring of mud system will be visual
- d) Full opening floor valve manually operated

5. MUD PROGRAM: A gel chemical water base mud will be used from surface casing to total depth.

Sufficient mud materials to maintain mud properties, control lost circulation and to contain blowout will be available at the wellsite.

6. LOGGING: DLL-SFL-GR from surface casing to total depth
BHC-Sonic with Caliper from surface casing to total depth
CNL-FDC-GR over zones of interest

TESTING: None.

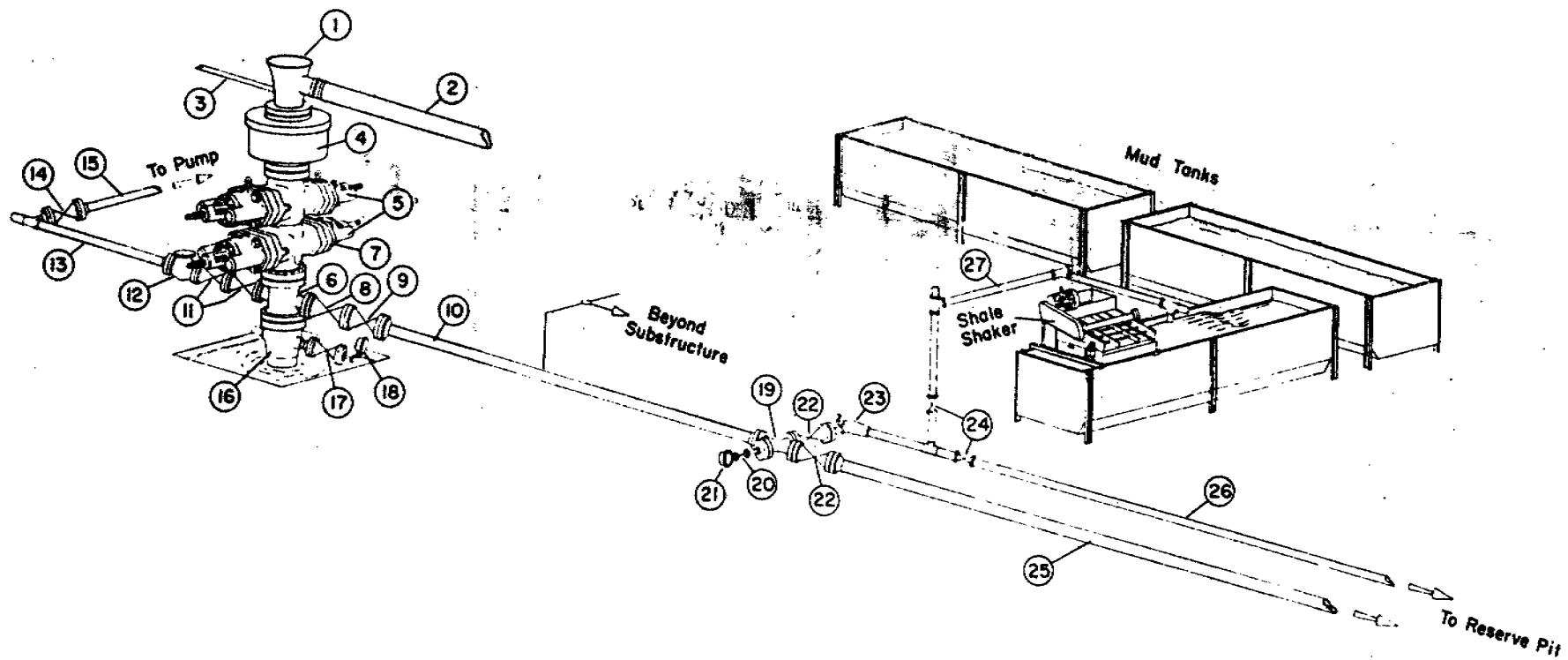
CORING: None.

7. ABNORMAL PRESSURE AND TEMPERATURE: No abnormal pressures are expected; a BHT of 150°F. and a BHP of 3550 psi are anticipated.

8. ANTICIPATED STARTING DATE: March 1, 1986

DURATION OF OPERATION: 12 days drilling

CELSIUS/WEXPRO 3000 psi BLOWOUT PREVENTION EQUIPMENT



STANDARD STACK REQUIREMENTS

Nº	ITEM	NOMINAL	ID	TYPE	FURNISHED BY	
					OPER.	CONTR.
1	Drilling Nipple (Rotating Head when air drilling)					
2	Flowline					
3	Fill up Line (eliminated for air drilling)	2"				
4	Annular Preventer			Hydril Cameron Shaffer		
5	Two Single or One dual Hydril oper rams.			U. ORC, F. LWS, R. F		
6	Drilling spool with 3" and 2" outlets			Forged		
7	As Alternate to (6) Run & Kill and Choke lines from outlets in this ram					
8	Gate Valve		3-1/8			
9	Valve-hydraulically operated (Gate)		3-1/8			
10	Choke Line	3"				
11	Gate Valves		2-1/16			
12	Check Valve		2-1/16			
13	Kill Line	2"				
14	Gate Valve		2-1/16			
15	Kill Line to Pumps	2"				
16	Casing Head					
17	Valve Gate _____ Plug _____		1-13/16			
18	Compound Pressure Cage					
	Wear Bushing					

STANDARD CHOKE AND KILL REQUIREMENTS

[illegible]

DESIGNATION OF OPERATOR

The undersigned is, on the records of the Department of Natural Resources, Division of State Lands, holder of lease, ML 11004 :

and hereby designates

NAME: Wexpro Company
ADDRESS: 79 South State Street
P.O. Box 11070

Salt Lake City, UT 84147

as his operator and local agent, with full authority to act in his behalf in complying with the terms of the lease and regulations applicable thereto and on whom the Director of the Division of State Lands or his representative may serve written or oral instructions in securing compliance with the Rules and Regulations Governing the Issuance of Mineral Leases with respect to (describe acreage to which this designation is applicable):

T10S-R19E, SLM, UTAH

Sec. 2: Lots 1,2,3,4, S $\frac{1}{2}$ N $\frac{1}{2}$, S $\frac{1}{2}$ (All)

Containing 645.79 acres, m/1

It is understood that this designation of operator does not relieve the lessee of responsibility for compliance with the terms of the lease and the Rules and Regulations. It is also understood that this designation of operator does not constitute an assignment of any interest in the lease.

In case of default on the part of the designated operator, the lessee will make full and prompt compliance with all regulations, lease terms, or orders of the Director, Division of State Lands or his representative.

The lessee agrees promptly to notify the Division of State Lands of any change in the designated operator.

ATTEST:

By: 

Assistant Secretary

CELSIUS ENERGY COMPANY

79 South State Street

P.O. Box 11070

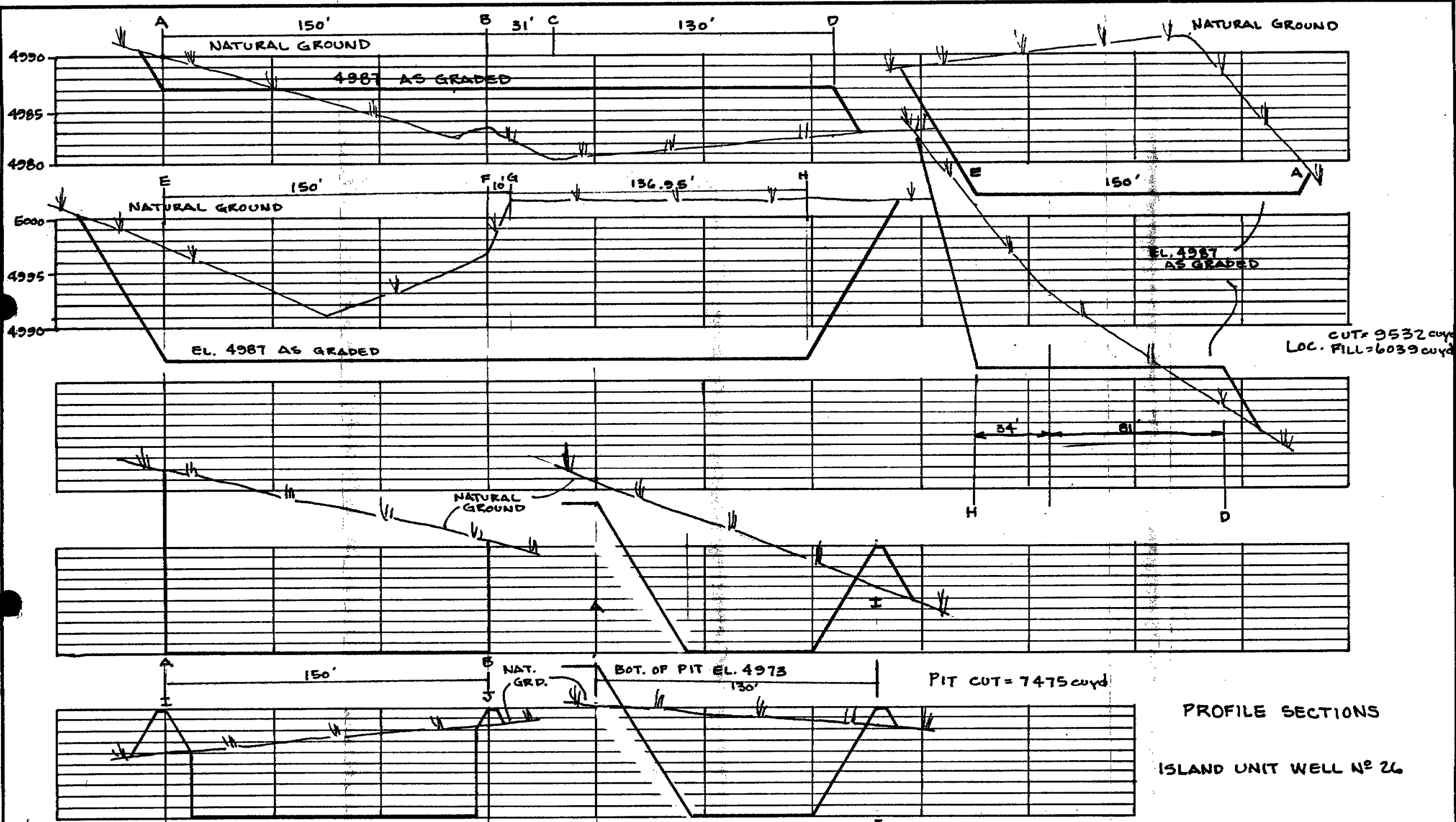
Salt Lake City, UT 84147

By: 

President

3-18-86

(Date)

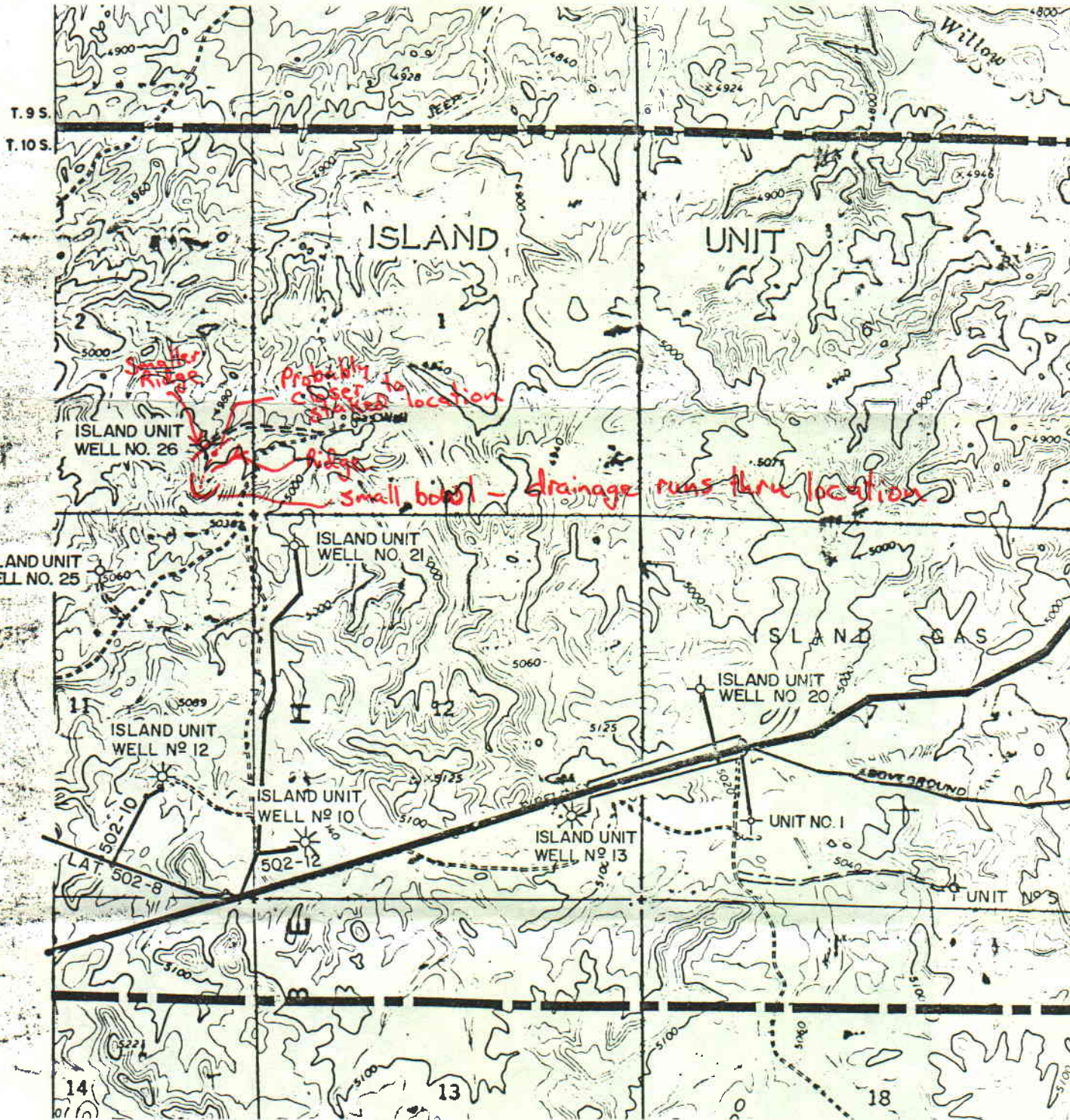


PROFILE SECTIONS
ISLAND UNIT WELL NO 26

SCALE HORIZ. 1" = 50'
SCALE VERT. 1" = 10'

MUD PIT IS UNLINED, CUTS & FILLS ARE AT 2:1 UNLESS NOTED, SYMBOL FOR NATURAL GROUND

M-25078



TABULATION

Feet
Rods
Miles

Township	<u>T. 10 S.</u>
Range	<u>R. 19 E</u>
Meridian	<u>G.L.B. & M.</u>
County	<u>Uintah</u>
State	<u>Utah</u>



Mountain Fuel Resources, Inc.
Rock Springs, Wyoming

Area Map

TO SERVE
Island Unit Well No. 25 & 26
ACROSS
U. S. GOVERNMENT LANDS

Scale: 1" = 2000'

Ckd.

Appr.

Drawn By: RCP 2.4.86

Drwg. No. 25075

OPERATOR Wexpro DATE 2-14-86

WELL NAME Island Unit 26

SEC SE SE 2 T 10S R 19E COUNTY Wintet

43-047-31701
API NUMBER

State
TYPE OF LEASE

CHECK OFF:

☒ PLAT

☒ BOND

☒ NEAREST WELL

☒ LEASE

☒ FIELD

☒ POTASH OR OIL SHALE

PROCESSING COMMENTS:

Unit well

Water - 44-367 (T54801)

& - State History -

& Need D.O. from Gelsius - Rec 3/18/86

APPROVAL LETTER:

SPACING: ☒ 203 Island
UNIT

☐ 302

☐ CAUSE NO. & DATE

☐ 302.1

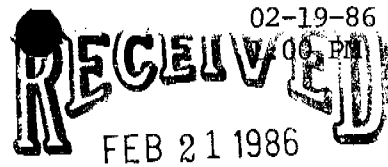
STIPULATIONS:

~~& 1 - Water~~

~~& 2 - State History~~

1. - ~~Reserve~~ ^{Pit} shall be lined with bentonite at a minimum concentration of 2 lbs. per square foot.

2. Culverts shall be installed and natural drainages ^{shall be} diverted to prevent any influent to or effluent from the well location



ONSITE PREDRILL INSPECTION FORM

DIVISION OF
OIL, GAS & MINING

COMPANY Wexpro Company WELL NO. Island Unit #26

SE/SE

LOCATION: SECTION 2 TOWNSHIP 10 S RANGE 19 E COUNTY Uintah

LEASE NO. ML-11004 ONSITE INSPECTION DATE 02-19-86

(A) PERSONS IN ATTENDANCE Alex Maser & Cathy Sansberg (Wexpro)
Greg Darlington (BLM), Dirt Contractors, Ed Deputy (DOGM).

(B) SURFACE FORMATION AND CHARACTERISTICS Uintah Fm, soil - sandy with very
little clay, ledgerock in surrounding ridges - sandy siltstone to shale,
thin to med. bedded.

(C) BRIEF DESCRIPTION OF VEGETATION Sage and native grasses - sparse cover.

(D) ARCHAEOLOGICAL CLEARANCE: YES OR NO Yes

(E) DESCRIPTION OF TOPOGRAPHY (drainages, slope, roads, etc.) Small hollow
between 10 to 20 ft ridges, drainage for small bowl to south runs through
location, approx 3 to 4⁰ north slope, existing road approx 1500 ft to west.

(F) CONDITIONS FOR APPROVAL:

PIT LINING (YES OR NO) Yes

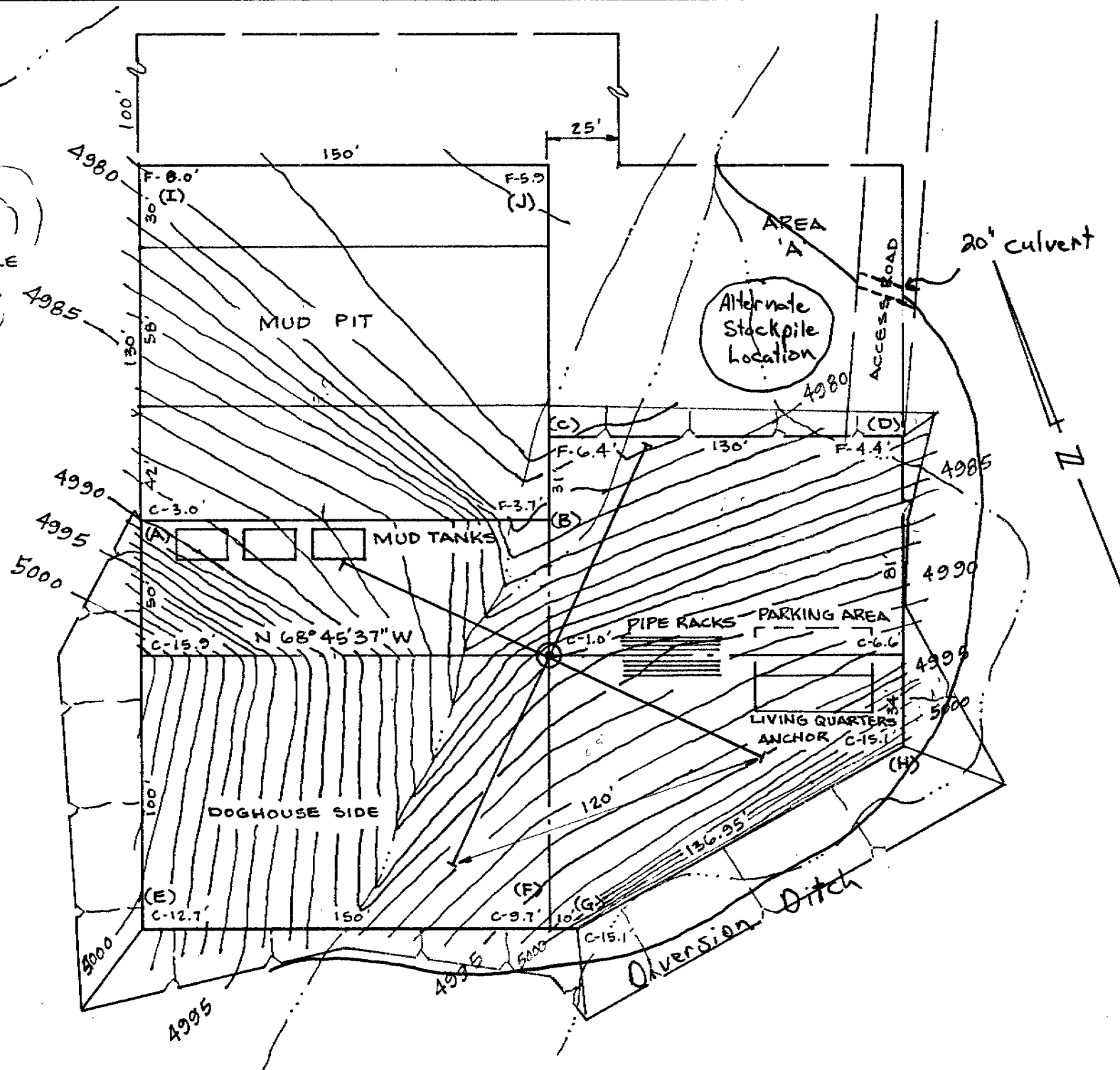
TYPE OF LINING IF NEEDED Bentonite (2 lb/sq ft minimum)

ADDITIONAL REQUIREMENTS Diversion ditches around location, 20" culvert
under access road for diversion ditch.

SIGNATURE: Ed Deputy

TITLE Inspector

TOPSOIL
STOCKPILE



AT SITES WHERE TOPSOIL IS PRESENT SAME IS TO BE REMOVED AND STORED ON THE ADJACENT LAND FOR RESTORATION AT THE SITE WHEN REQUIRED. 1700 CU. YDS. OR THE TOP 6" OF TOPSOIL IS TO BE STOCKPILED.

Bentonite liner

MUD PIT TO BE UNLINED & FENCED

AREA "A" SHOULD BE LEVELED TO STACK DRILL PIPE, SET "FRAC" TANKS, TESTING SEPARATOR AND OTHER EQUIPMENT.

REFERENCE POINTS ARE SET AT 220' NORTH, 130.7' SOUTH, 150.9' EAST AND 221.5' WEST.

AREA FOR LOCATION IS 2.11 ACRES.

REFERENCE DRAWINGS ARE:

M-25076 M-25075
M-25078

DEADMAN ANCHORS ARE AT 120' SPACING (MIN.)

CUTS AND FILLS ARE AT 2:1 UNLESS OTHERWISE NOTED.

CONTOURS ARE AT 1' INTERVALS.

DRAINAGES TO BE DIVERTED AROUND SITE AND CULVERT INSTALLED AT ROAD CROSSING.

ISLAND UNIT WELL N° 26



M-25077

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. ML-11004	
2. NAME OF OPERATOR Wexpro Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME ---	
3. ADDRESS OF OPERATOR P. O. Box 458, Rock Springs, Wyoming 82902		7. UNIT AGREEMENT NAME Island	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SE SE, 497' FEL, 755' FSL		8. FARM OR LEASE NAME Unit	
14. PERMIT NO. 43-047-31701		9. WELL NO. 26	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) GR 4987'		10. FIELD AND POOL, OR WILDCAT Island	
		11. SEC., T., R., M., OR SLE. AND SUBST OR AREA 2-10S-19E	
		12. COUNTY OR PARISH Uintah	13. STATE Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input checked="" type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Wexpro Company requests permission to change the Casing Program of the above captioned well APD as follows:

Footage	Size	Grade	Wt.	Condition	Thread	Cementing Program
300'	9-5/8	K-55	36	New	8 rd ST&C	165 sacks Regular Type G with 3% CaCl and 1/4-pound flocele/sack; cement to be brought to surface.
6950'	5	S-95	18	Used	8 rd LT&C	Cement top will be brought 1000' from surface with 50-50 Pozmix with 8% gel, 0.2% Halad-24, 10% salt, 5 pounds gilsonite/sack and 1/4-pound flocele/sack, plus 1000' 50-50 Pozmix with 2% gel, 0.6% Halad-24, 10% salt and 1/4-pound flocele/sack.

RECEIVED
APR 02 1986

DIVISION OF

Change in casing program **OIL, GAS & MINING** liability of casing in stock.

Water for drilling will be obtained from the Green River under Application No. T-61634, permit number 49-1390.

18. I hereby certify that the foregoing is true and correct

SIGNED A. J. Maser TITLE Drilling Superintendent DATE March 31, 1986

(This space for Federal or State office use)

APPROVED BY _____
COUNCIL OF APPROVAL, IF ANY:

TITLE _____

APPROVED BY THE STATE
OF UTAH DIVISION OF
OIL, GAS, AND MINING

DATE: 4-7-86

BY: John R. Dyer

*See Instructions on Reverse Side

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUBMIT IN TRIPLICATE*
 (Other instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
 Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. ML-11004	
2. NAME OF OPERATOR Wexpro Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME ---	
3. ADDRESS OF OPERATOR P. O. Box 458, Rock Springs, WY 82902		7. UNIT AGREEMENT NAME Island	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SE SE, 497' FEL, 755' FSL		8. FARM OR LEASE NAME Unit	
		9. WELL NO. 26	
		10. FIELD AND POOL, OR WILDCAT Island	
		11. SEC., T., R., M., OR S.E. AND SUBST OR AREA 2-105-19E	
14. PERMIT NO. 43-047-31701	15. ELEVATIONS (Show whether SV, RT, OR, etc.) GR 4987'	12. COUNTY OR PARISH Uintah	13. STATE Utah

16. **Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data**

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input checked="" type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. **DESCRIBE PROPOSED OR COMPLETED OPERATIONS** (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Wexpro Company proposes to line the drilling reserve pit for the above captioned well with a plastic liner rather than 2-pounds per square foot bentonite as previously agreed.

Verbal permission was obtained from Ed Deputy on April 16, 1986.

RECEIVED
 APR 21 1986

DIVISION OF
 OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED C. J. Maser

TITLE Drilling Superintendent DATE April 13, 1986

(This space for Federal or State office use)

APPROVED BY _____
 COORDINATE OF APPROVAL, IF ANY:

TITLE _____

APPROVED BY THE STATE
OF UTAH DIVISION OF
OIL, GAS, AND MINING
 DATE: 4-22-86
 BY: Shirley R. Boye

w/oc

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

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3. ADDRESS OF OPERATOR P. O. Box 458, Rock Springs, Wyoming 82902		7. UNIT AGREEMENT NAME Island	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SE SE, 497' FEL, 755' FSL		8. FARM OR LEASE NAME Unit	
14. PERMIT NO. 43-047-31701		9. WELL NO. 26	
15. ELEVATIONS (Show whether OF, RT, GR, etc.) GR 4987'		10. FIELD AND POOL, OR WILDCAT Island	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 2-10S-19E	
		12. COUNTY OR PARISH Uintah	13. STATE Utah

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐Supplemental History ☒(NOTE: Report results of multiple completion on Well
(Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Spudded well at 9:00 A.M. 4-24-86 with air rig.

In the process of moving on rotary rig. Will be using Brinkerhoff Rig No. 85.

RECEIVED
APR 28 1986DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED

A. J. MasonTITLE Drilling SuperintendentDATE April 25, 1986

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

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14. PERMIT NO. 43-047-31701		9. WELL NO. 26	
15. ELEVATIONS (Show whether OF, RT, GR, etc.) GR 4987' KB 5001.75'		10. FIELD AND POOL, OR WILDCAT Island	
		11. SEC., T., R., M., OR B.L. AND SOUTH OF AREA 2-10S-19E	
		12. COUNTY OR PARISH Uintah	13. STATE Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) Supplemental History <input checked="" type="checkbox"/>	

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Depth 6655', drilling.

Landed 9-5/8-inch O.D., 36-pound, K-55, 8 round thread, ST&C casing at 305.12 feet KBM or 14.75 feet below KB from ground level. Pumped 20 barrels gelled water. Cemented with 165 sacks Class G cement with 2% CaCl and 1/4-pound flocele per sack. Displaced with 20.5 barrels water. Returned 20 barrels cement slurry to surface. Cement in place at 10:30 P.M. 4-24-86.

RECEIVED
MAY 05 1986DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED

*C. J. Maser*TITLE Drilling SuperintendentDATE May 2, 1986

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. ML-11004	
2. NAME OF OPERATOR Wexpro Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME ---	
3. ADDRESS OF OPERATOR P. O. Box 458, Rock Springs, WY 82902		7. UNIT AGREEMENT NAME Island	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface SE SE, 497' FEL, 755' FSL		8. FARM OR LEASE NAME Unit	
14. PERMIT NO. 43-047-31701		9. WELL NO. 26	
15. ELEVATIONS (Show whether DP, RT, GR, etc.) GR 4987' KB 5001.75'		10. FIELD AND POOL, OR WILDCAT Island	
		11. SEC., T., R., M., OR S.E. AND SURVEY OR AREA 2-10S-19E	
		12. COUNTY OR PARISH Uintah	13. STATE Utah

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) Supplemental History ☒REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

Depth 6995', rig released 8:00 P.M. 5-5-86, waiting on completion tools.

18. I hereby certify that the foregoing is true and correct

SIGNED

C. J. Mann

TITLE

Drilling Superintendent

DATE May 9, 1986

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:



STATE OF UTAH
NATURAL RESOURCES
Oil, Gas & Mining

Norman H. Bangerter, Governor
Dee C. Hansen, Executive Director
Dianne R. Nielson, Ph.D., Division Director

355 W. North Temple • 3 Triad Center • Suite 350 • Salt Lake City, UT 84180-1203 • 801-538-5340

March 18, 1986

Wexpro Company
P. O. Box 458
Rock Springs, Wyoming 82902

Gentlemen:

Re: Well No. Island Unit 26 - SE SE Sec. 2, T. 10S, R. 19E
755' FSL, 497' FEL - Uintah County, Utah

Approval to drill the referenced well is hereby granted in accordance with Section 40-6-18, Utah Code Annotated, as amended 1983; and predicated on Rule 203, Oil and Gas Conservation General Rules, subject to the following stipulations:

1. Reserve pit shall be lined with bentonite at a minimum concentration of 2 lbs per square foot.
2. Culverts shall be installed and natural drainages shall be diverted to prevent any influent to or effluent from the well location.

In addition, the following actions are necessary to fully comply with this approval:

1. Spudding notification to the Division within 24 hours after drilling operations commence.
2. Submittal to the Division of completed Form OGC-8-X, Report of Water Encountered During Drilling.
3. Prompt notification to the Division should you determine that it is necessary to plug and abandon this well. Notify John R. Baza, Petroleum Engineer, (Office) (801) 538-5340, (Home) 298-7695, or R. J. Firth, Associate Director, (Home) 571-6068.
4. Compliance with the requirements and regulations of Rule 311.3, Associated Gas Flaring, Oil and Gas Conservation General Rules.

Page 2
Wexpro Company
Well No. Island Unit 26
March 18, 1986

5. Prior to commencement of the proposed drilling operations, plans for toilet facilities and the disposal of sanitary waste at each drill site shall be submitted to the local health department having jurisdiction. Any such drilling operations and any subsequent well operations must be conducted in accordance with applicable State and local health department regulations. A list of all local health departments and copies of applicable regulations are available from the Division of Environmental Health, Bureau of General Sanitation, telephone (801) 533-6163.
6. This approval shall expire one (1) year after date of issuance unless substantial and continuous operation is underway or an application for an extension is made prior to the approval expiration date.

The API number assigned to this well is 43-047-31701.

Sincerely,



R. J. Girth
Associate Director, Oil & Gas

as
Enclosures
cc: State Lands
Bureau of Land Management
D. R. Nielson

8159T

FILING FOR WATER IN THE STATE OF UTAH

APPLICATION TO APPROPRIATE WATER

Rec. by _____
Fee Paid \$ _____
Platted _____
Microfilmed _____
Roll # _____

For the purpose of acquiring the right to use a portion of the unappropriated water of the State of Utah, application is hereby made to the State Engineer, based upon the following showing of facts, submitted in accordance with the requirements of the Laws of Utah.

WATER USER CLAIM NO. 49 - 1390

APPLICATION NO. T61634

PRIORITY OF RIGHT: March 31, 1986

FILING DATE: March 31, 1986

OWNER INFORMATION

Name: D.E. Casada Construction
Address: 221 South 1000 East, Vernal, UT 84078
The land is not owned by the applicant(s), see explanatory.

RECEIVED
APR 17 1986

QUANTITY OF WATER: 12.0 acre feet (Ac. Ft.)

DIVISION OF
OIL, GAS & MINING

SOURCE: Green River DRAINAGE: SE Uinta Basin

POINT(S) OF DIVERSION:

COUNTY: Uintah

(1) N. 4224 feet, W. 1056 feet, from the SW Corner of Section 5,
Township 10 S, Range 19 E, SLB&M
Description of Diverting Works: Pumped into tank Trucks

COMMON DESCRIPTION: 14 MI. SW of Ouray

NATURE AND PERIOD OF USE

Oil Recovery: From March 31 to March 31.

PURPOSE AND EXTENT OF USE

Oil Recovery: Oil Well Drilling & Completion of Island Units 25, 26, 27 & 28
Island Unit #25 in Sec. 2, T10S, R19E, SLB&M, Island Unit # 26 in Sec.
11, T10S R19E, SLB&M, Island Unit # 27 in Sec. 9, T10S, R20E,
SLB&M, Island Unit # 28 in Sec. 6, T10S, R20E, SLB&M

PLACE OF USE

The water is used in all or parts of each of the following legal subdivisions.

TOWN	RANGE	SEC	North East Quarter				North West Quarter				South West Quarter				South East Quarter			
			NE $\frac{1}{4}$	NW $\frac{1}{4}$	SW $\frac{1}{4}$	SE $\frac{1}{4}$	NE $\frac{1}{4}$	NW $\frac{1}{4}$	SW $\frac{1}{4}$	SE $\frac{1}{4}$	NE $\frac{1}{4}$	NW $\frac{1}{4}$	SW $\frac{1}{4}$	SE $\frac{1}{4}$	NE $\frac{1}{4}$	NW $\frac{1}{4}$	SW $\frac{1}{4}$	SE $\frac{1}{4}$
10 S	19 E	2	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
10 S	19 E	11	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
10 S	20 E	6	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
10 S	20 E	9	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X

All locations in Salt Lake Base and Meridian

EXPLANATORY

Diversion point is on BLM

Appropriate

STATE OF UTAH
OIL & GAS CONSERVATION COMMISSION

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. ML-11004	
2. NAME OF OPERATOR Wexpro Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME --	
3. ADDRESS OF OPERATOR P. O. Box 458, Rock Springs, Wyoming 82902		7. UNIT AGREEMENT NAME Island	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SE SE, 497' FEL, 755' FSL		8. FARM OR LEASE NAME Unit	
14. PERMIT NO. 43-047-31701		9. WELL NO. 26	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) GR 4987' KB 5001.75'		10. FIELD AND POOL, OR WILDCAT Island	
		11. SEC., T., R., N., OR D.E. AND SURVEY OR AREA 2-10S-19E	
		12. COUNTY OR PARISH Uintah	13. STATE Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) Supplemental History <input checked="" type="checkbox"/>	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Depth 6995', waiting on completion tools. Please be advised that Wexpro Company will complete this well using a CRC completion rig which will move on location upon finalization of completion plans.

Landed 5-inch O.D., 18-pound, S-95, 8 round thread, LT&C casing at 6979.90 feet KBM or 14.75 feet below KB with full indicator weight of 100,000 pounds on ERC C-22 slips. Mixed packer fluid into mud while circulating with rig pump. Preceded cement with 20 barrels 2% KCL, 35 barrels mud flush and 50 barrels spacer. Cemented with 615 sacks Class H lead cement treated with 3% Lo-Dense and 1/4-pound per sack flocele. Tailed in with 285 sacks 50-50 Pozmix A with 2% gel treated with 0.6% Halad 24, 10% salt and 1/4-pound per sack flocele. Displaced with 2% KCL water. Good returns while mixing and displacing. Bumped plug with 700 psi. Floats held okay. Cement in place at 2:45 P.M. 5-5-86.

RECEIVED

MAY 19 1986

DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED

A. J. Mauer

TITLE Drilling Superintendent

DATE May 14, 1986

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
OIL & GAS CONSERVATION COMMISSION

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. ML-11004	
2. NAME OF OPERATOR Wexpro Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME 	
3. ADDRESS OF OPERATOR P. O. Box 458, Rock Springs, Wyoming 82902		7. UNIT AGREEMENT NAME Island	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SE SE, 497' FEL, 755' FSL		8. FARM OR LEASE NAME Unit	
		9. WELL NO. 26	
		10. FIELD AND POOL, OR WILDCAT Island	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 2-10S-19E	
14. PERMIT NO. 43-047-31701	15. ELEVATIONS (Show whether DF, ST, GR, etc.) GR 4987' KB 5001.75'	12. COUNTY OR PARISH Uintah	13. STATE Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

FULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Supplemental History

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

XX

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

The well is presently in the process of being completed.

RECEIVED

JUN 02 1986

DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED

A. J. Mauer

TITLE

Drilling Superintendent

DATE May 30, 1986

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

070702

56 64 01

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

5. LEASE DESIGNATION AND SERIAL NO.

ML-11004

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

UNIT AGREEMENT NAME

Island

FARM OR LEASE NAME

Unit

9. WELL NO.

26

10. FIELD AND POOL, OR WILDCAT

Island

11. SEC. T., R., M., OR BLOCK AND SURVEY
OR AREA

2-10S-19E

12. COUNTY OR

Utah

13. STATE

Utah

1a. TYPE OF WELL:

OIL
WELL ☐GAS
WELL ☒DRY ☐Other ☐

b. TYPE OF COMPLETION:

NEW
WELL ☒WORK
OVER ☐DEEP-
EN ☐PLUG
BACK ☐DIFF.
RESVR. ☐Other ☐

2. NAME OF OPERATOR

Wexpro Company

3. ADDRESS OF OPERATOR

P. O. Box 458, Rock Springs, Wyoming 82902

DIVISION OF
OIL, GAS & MINING

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface

SE SE, 497' FEL, 755' FSL

At top prod. interval reported below

At total depth

14. PERMIT NO.

43-047-31701

DATE ISSUED

JUN 25 1986

12. COUNTY OR

Utah

13. STATE

Utah

15. DATE SPUDDED

4-24-86

16. DATE T.D. REACHED

5-4-86

17. DATE COMPL. (Ready to prod.)

6-19-86

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

GR 4987'

KB 5001.75'

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

6995'

21. PLUG, BACK T.D., MD & TVD

6931'

22. IF MULTIPLE COMPL.,
HOW MANY*23. INTERVALS
DRILLED BY

ROTARY TOOLS

0-6995'

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

Wasatch - 5297 feet to 6906 feet

25. WAS DIRECTIONAL
SURVEY MADE

No

26. TYPES ELECTRIC AND OTHER LOGS RUN

FDC-CNL, DL-GR, Spectralog, CBL-GR

27. WAS WELL CORRED

No

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
9-5/8	36	305.12	12-1/4	165 sx Class G + 2% CaCl 1/2# flocele/sx	6
5	18	6979.90	7-7/8	615 sx Class H w/3% Lo- Dense & 285 sx 50-50 Pozmix	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-3/8	5258.17	

31. PERFORATION RECORD (Interval, size and number)

See Attachment

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
6681-6906'	132,000 gals gel, 22,000# 100 mesh sand, 328,000# 20/40 sand
6441-6564'	87,864 gals gel, 15,000# 100 mesh sand, 175,000# 20/40 sand

33.* PRODUCTION

DATE FIRST PRODUCTION 6-19-86 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing WELL STATUS (Producing or shut-in) Shut-in

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
6-19-86	20	15/64	→	50.25	1902	64.25	37.85
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
1650	1825	→	54.8	1917	70.1		

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Vented while testing

TEST WITNESSED BY

M. R. Sliger

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

Thomas L. Smith

TITLE Director, Petroleum Eng.

DATE June 20, 1986

*(See Instructions and Spaces for Additional Data on Reverse Side)

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completions), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Seals Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 23 and 24 above.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF: CORDED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES			38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	NAME	MEAN DEPTH	TOP TRUE VERT. DEPTH
			Uintah	Surface	
			Green River	1841'	
			Birds Nest		
			Aquifer	2341'	
			Wasatch Tongue	4420'	
			Green River		
			Tongue	4783'	
			Wasatch	4938'	
			Chapita Wells		
			Zone	5669'	

Island Unit Well No. 26
Lease No. ML-11004
SE SE 2-10S-19E
Uintah County, Utah

31. Perforation Record (Interval, Size and Number)

6681'-6683', 6873'-6875' KBM with one shot per foot
6766'-6782', 6814'-6830' KBM with one shot per two feet
6900', 6903', 6906' KBM with one shot each

6441'-6452' KBM with one shot per foot
6518', 6520', 6522', 6524', 6526', 6558', 6560', 6562', 6564' KBM
with one shot each

6118'-6142' KBM with one shot every three feet
6153'-6161', 6188'-6202' KBM with one shot every two feet
6256', 6258', 6304', 6306', 6337', 6339' KBM with one shot each

5796', 5798', 5822', 5826', 5882', 5887', 5892', 5897', 5902', 5907',
5912', 5917', 5922', 5966', 5968', 5971', 5974', 5976', 5978', 5981',
5984', 5986' KBM with one shot each

5297'-5299' KBM with one shot per foot
5476'-5512' KBM with one shot per four feet
5585'-5595', 5601'-5605' KBM with one shot per two feet
5625', 5628', 5630', 5633' KBM with one shot each

32. Acid, Shot, Fracture, Cement, Squeeze, Etc.

Depth Interval	Amount and Kind of Material Used
6118-6339'	143,724 gals gel, 22,000# 100 mesh sand, 296,000# 20/40
5796-5986'	140,280 gals gel, 19,000# 100 mesh sand, 278,000# 20/40
5297-5633'	113,400 gals gel, 19,000# 100 mesh sand, 254,000# 20/40

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

102222

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. ML-11004
2. NAME OF OPERATOR Wexpro Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME ---
3. ADDRESS OF OPERATOR P. O. Box 458, Rock Springs, WY 82902		7. UNIT AGREEMENT NAME Island
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SE SE 497' FEL, 755' FSL		8. FARM OR LEASE NAME Unit
14. PERMIT NO. 43-047-31701		9. WELL NO. 26
15. ELEVATIONS (Show whether SF, RT, GR, etc.) GR 4987		10. FIELD AND POOL, OR WILDCAT Island
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 2-10S-19E
		12. COUNTY OR PARISH Uintah
		13. STATE Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐

(Other) See Below

PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

K

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐

(Other)

REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

Federal (BLM) Surface

Request permission to install production facilities as shown on attached drawing.

RECEIVED
OCT 20 1986DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED

TITLE District Manager

DATE 10/8/86

(This space for Federal or State office use)

APPROVED BY

TITLE

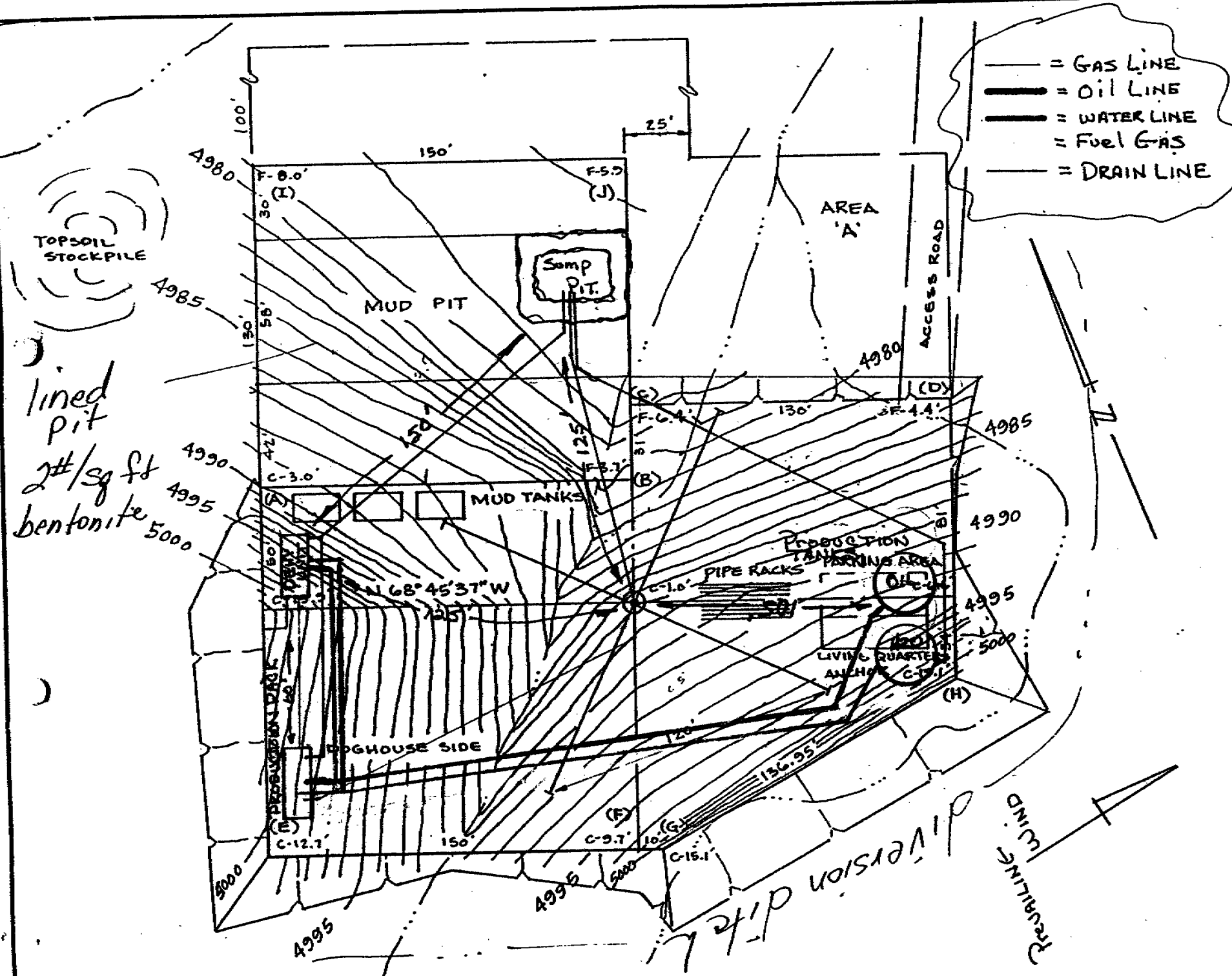
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED BY THE STATE
OF UTAH DIVISION OF
OIL, GAS, AND MINING

DATE: 10-21-86

BY: John R. Day

*See Instructions on Reverse Side



AT SITES WHERE TOPSOIL IS PRESENT SAME IS TO BE REMOVED AND STORED ON THE ADJACENT LAND FOR RESTORATION AT THE SITE WHEN REQUIRED. 1700 CU. YDS. OR THE TOP 6" OF TOPSOIL IS TO BE STOCKPILED.

MUD PIT TO BE UNLINED & FENCED

AREA "A" SHOULD BE LEVELED TO STACK DRILL PIPE, SET "FRAC" TANKS, TESTING SEPARATOR AND OTHER EQUIPMENT.

REFERENCE POINTS ARE SET AT 220' NORTH, 159.7' SOUTH, 150.9' EAST AND 221.5' WEST.

AREA FOR LOCATION IS 2.11 ACRES.

REFERENCE DRAWINGS ARE:
M-25076 M-25075
M-25078

DEADMAN ANCHORS ARE AT 120' SPACING (MIN.)

CUTS AND FILLS ARE AT 2:1 UNLESS OTHERWISE NOTED.

CONTOURS ARE AT 1' INTERVALS.

DRAINAGES TO BE DIVERTED AROUND SITE AND CULVERT INSTALLED AT ROAD CROSSING.

ISLAND UNIT WELL NO 26



M-25077

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUBMIT IN TRIPPLICATE*
(Other instructions on
reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. ML-11004	
2. NAME OF OPERATOR Wexpro Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME ---	
3. ADDRESS OF OPERATOR P. O. Box 458, Rock Springs, WY 82902		7. UNIT ASSIGNMENT NAME Island	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface SE SE 497' FEL, 755' FSL		8. FARM OR LEASE NAME Unit	
14. PERMIT NO. 43-047-31701		9. WELL NO. 26	
15. ELEVATIONS (Show whether sv, rt, or, etc.) GR 4987		10. FIELD AND FOOT, OR WILDCAT Island	
		11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA 2-10S-19E	
		12. COUNTY OR PARISH Uintah	13. STATE Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐

(Other) See Below

PULL OR ALTER CASING ☐MULTIPLE COMPLETS ☐ABANDON* ☐CHANGE PLANS ☐☒

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Federal (BLM) Surface

Request permission to install production facilities as shown on attached drawing.

RECEIVED
OCT. 20 1986

DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED AK HoganTITLE District ManagerDATE 10/8/86

(This space for Federal or State office use)

APPROVED BY _____

CONDITIONS OF APPROVAL, IF ANY:

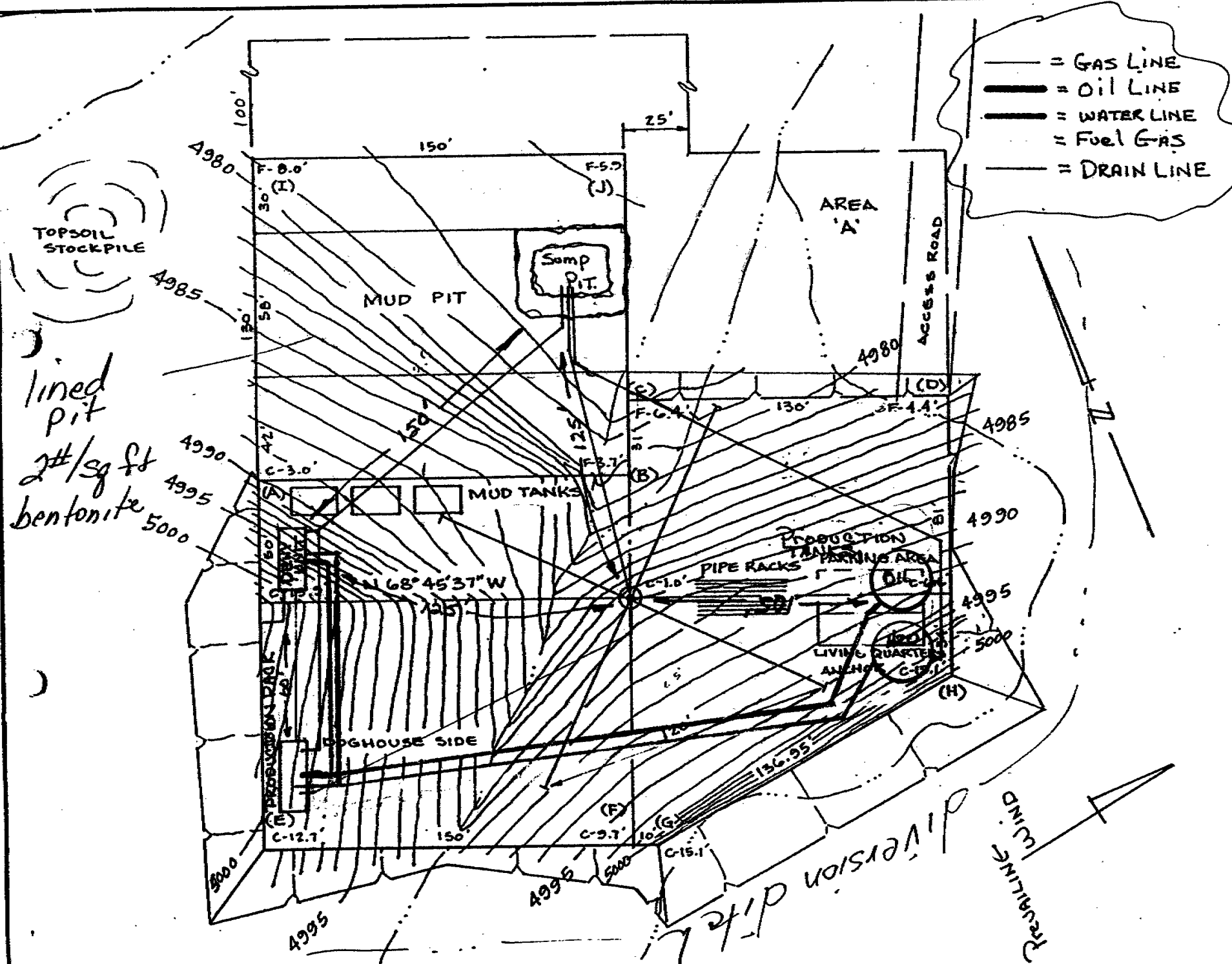
TITLE _____

ACCEPTED BY THE STATE
OF UTAH
DIVISION OF
OIL, GAS, AND MINING

DATE: 10-21-86

*See Instructions on Reverse Side

BY: _____



AT SITES WHERE TOPSOIL IS PRESENT SAME IS TO BE REMOVED AND STORED ON THE ADJACENT LAND FOR RESTORATION AT THE SITE WHEN REQUIRED. 1700 CU. YDS. OR THE TOP 6" OF TOPSOIL IS TO BE STOCKPILED.

MUD PIT TO BE UNLINED & FENCED

AREA "A" SHOULD BE LEVELED TO STACK DRILL PIPE, SET "FRAC" TANKS, TESTING SEPARATOR AND OTHER EQUIPMENT.

REFERENCE POINTS ARE SET AT 220' NORTH, 159.7' SOUTH, 158.9' EAST AND 221.5' WEST.

AREA FOR LOCATION IS 2.11 ACRES.

REFERENCE DRAWINGS ARE:
 M-25076 M-25075
 M-25078

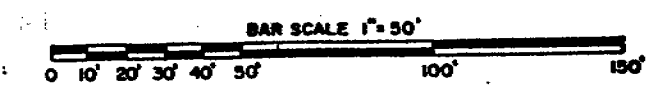
DEADMAN ANCHORS ARE AT 120' SPACING (MIN.)

CUTS AND FILLS ARE AT 2:1 UNLESS OTHERWISE NOTED.

CONTOURS ARE AT 1' INTERVALS.

DRAINAGES TO BE DIVERTED AROUND SITE AND CULVERT INSTALLED AT ROAD CROSSING.

ISLAND UNIT WELL N° 26



M-25077

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. ML-11004 /	
2. NAME OF OPERATOR Wexpro Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME ---	
3. ADDRESS OF OPERATOR P.O. Box 458, Rock Springs, Wyoming 82902		7. UNIT AGREEMENT NAME Island	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SE SE, 497' FEL, 755' FSL		8. FARM OR LEASE NAME Unit	
14. PERMIT NO. 43-047-31701		9. WELL NO. 26	
15. ELEVATIONS (Show whether SP, RT, OR, VCL) GR 4987'		10. FIELD AND POOL, OR WILDCAT Island	
		11. SEC., T., R., N., OR BLM. AND SURVEY OR AREA 2-10S-19E	
		12. COUNTY OR PARISH Uintah	13. STATE Utah

RECEIVED
DEC 03 1986
DIVISION OF
OIL, GAS & MINING

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) Install Production Facilities ☒PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Federal (BLM) Surface

Wexpro Company requests permission to install production facilities as shown on the attached drawing.

Wexpro Company was unable to install the facilities as perviously requested due to extensive rock outcroppings.

18. I hereby certify that the foregoing is true and correct

SIGNED AK [Signature]TITLE District ManagerDATE 12-1-86

(This space for Federal or State office use)

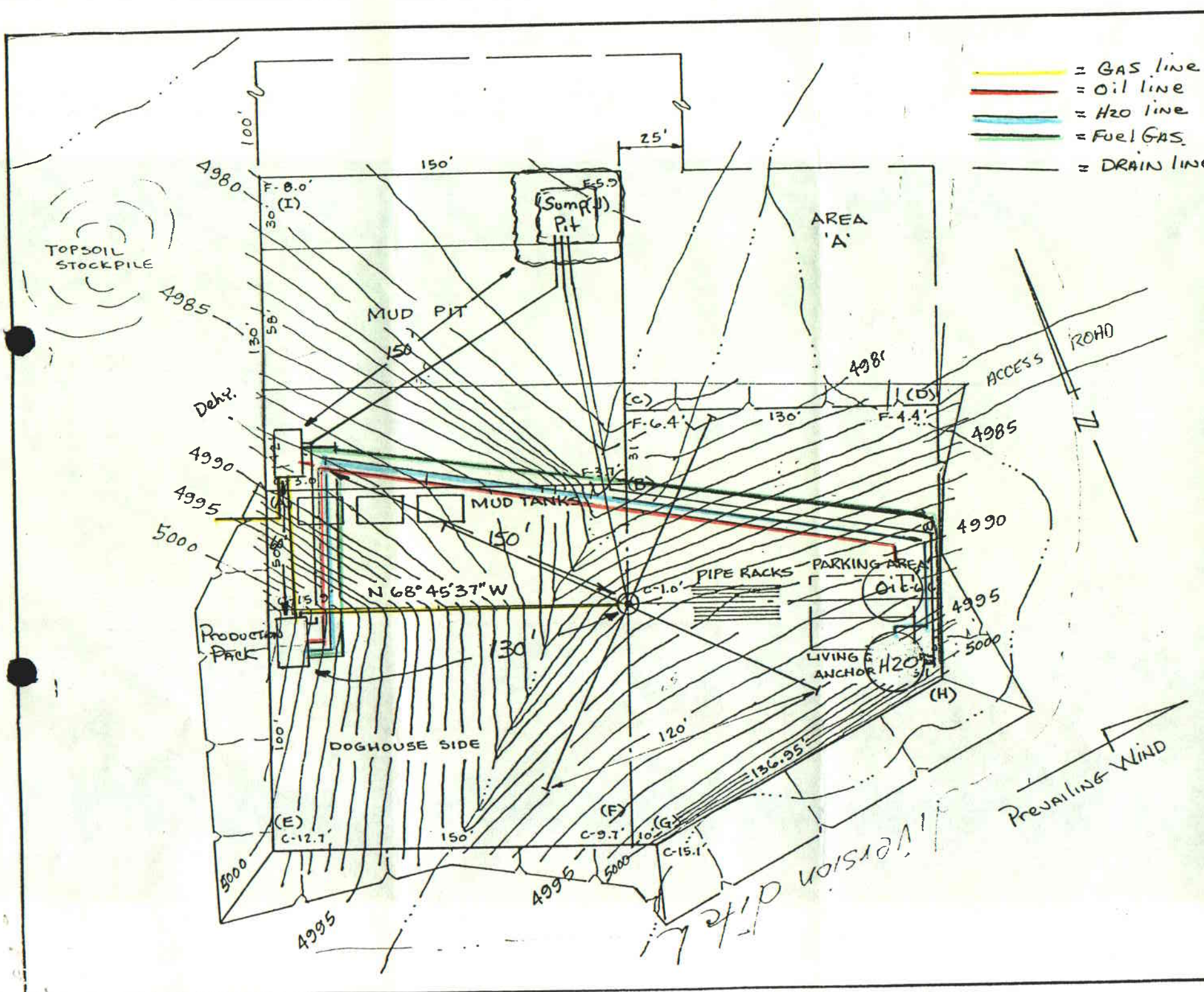
APPROVED BY _____

TITLE _____

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY THE STATE
OF UTAH DIVISION OF
OIL, GAS, AND MININGDATE: 12-8-86BY: [Signature]

*See Instructions on Reverse



AT SITES WHERE TOPSOIL IS PRESENT SAME IS TO BE REMOVED AND STORED ON THE ADJACENT LAND FOR RESTORATION AT THE SITE WHEN REQUIRED. 1700 CU. YDS. OR THE TOP 6" OF TOPSOIL IS TO BE STOCKPILED.

MUD PIT TO BE UNLINED & FENCED

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REFERENCE POINTS ARE SET AT 220' NORTH, 139.7' SOUTH, 158.9' EAST AND 221.5' WEST.

AREA FOR LOCATION IS 2.11 ACRES.

REFERENCE DRAWINGS ARE:
 M-25076 M-25075
 M-25078

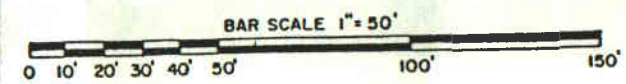
DEADMAN ANCHORS ARE AT 120' SPACING (MIN.)

CUTS AND FILLS ARE AT 2:1 UNLESS OTHERWISE NOTED.

CONTOURS ARE AT 1' INTERVALS.

DRAINAGES TO BE DIVERTED AROUND SITE AND CULVERT INSTALLED AT ROAD CROSSING.

ISLAND UNIT WELL No 26



M-25077

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUB IN TRIPLICATE*
(Other instructions on
reverse side)

011316

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. ML-11004
2. NAME OF OPERATOR Wexpro Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME ---
3. ADDRESS OF OPERATOR P. O. Box 458, Rock Springs, Wyoming 82902		7. UNIT AGREEMENT NAME Island
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SE SE, 497' FEL, 755' FSL		8. FARM OR LEASE NAME Unit
14. PERMIT NO. 43-047-31701		9. WELL NO. 26
15. ELEVATIONS (Show whether DF, RT, GR, etc.) GR 4987'		10. FIELD AND POOL, OR WILDCAT Island
DIVISION OF OIL, GAS & MINING JAN 08 1987		11. SEC., T., R., M., OR B.L. AND SURVEY OR AREA 2-10S-19E
		12. COUNTY OR PARISH Uintah
		13. STATE Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐PULL OR ALTER CASING ☐FRACTURE TREAT ☐MULTIPLE COMPLETE ☐SHOOT OR ACIDIZE ☐ABANDON* ☐REPAIR WELL ☐CHANGE PLANS ☐(Other) ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐REPAIRING WELL ☐FRACTURE TREATMENT ☐ALTERING CASING ☐SHOOTING OR ACIDIZING ☐ABANDONMENT* ☐(Other) Approval for Disposal Pits ☒

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Wexpro Company requests permission to dispose of produced water into two unlined disposal pits located on the wellsite of the above captioned well. Pit No. 1 which is 24'X26'X5' will receive no more than five barrels of water per day on a monthly basis. Pit No. 2 which is a submerged barrel 3'X6' will receive no more than a trace of water per day. The producing formation of the above captioned well is the Wasatch formation. Both pits are fully contained on the well location and no new disturbance was created. Pit No. 1 is fenced and bermed.

Please see attached schematic for further reference.

Original + 2 copies
were sent to Div.
of Env. Health, BWPC
on 1-9-87.

18. I hereby certify that the foregoing is true and correct

SIGNED HR. LoganTITLE Dist.





(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

CONDITIONS OF APPROVAL, IF ANY: _____

LEGEND

-  GAS METER
 CHOKE
 VALVE
 SEAL

VALVE NO.	PROD.	SALES	VALVE NO.	PROD.	SALES
1	CLOSED	OPEN			
2	OPEN	CLOSED			
3	CLOSED	OPEN			
4	OPEN	CLOSED			
5	CLOSED	CLOSED			

OPERATOR: Wexpro Company

LEASE NO. : ML-11004

TYPE: STATE

NAME: ISLAND UNIT WELL N° 26

SEC. 2

T. 10 S.

R. 12 E.

COUNTY: UINTAH

STATE : UTAH

INITIAL PRODUCTION: DECEMBER 1986

SITE SECURITY DIAGRAM

ISLAND UNIT WELL N° 26

DRAWN: 1/2/87 CRW

SCALE NONE

CHECKED:

DRWG.

APPROVED:

NO.

ORWG. 25392
NO.

43-047-31701
SGW



United States Department of the Interior 051417

BUREAU OF LAND MANAGEMENT
VERNAL DISTRICT OFFICE

170 South 500 East
Vernal, Utah 84078

IN REPLY
REFER TO:

3162.32
(U-8020)
Oil & Gas Leases
U-4481, ML-11004,
U-013768

RECEIVED
MAY 07 1987

**DIVISION OF
OIL, GAS & MINING**

April 28, 1987

Ms. Cathy J. Flansburg
Regulatory Affairs Technician
Wexpro Company
625 Connecticut Avenue
P.O. Box 1129
Rock Springs, Wyoming 82901

Re: Request for NTL-2B Approval
Island Unit Wells 25, 26, & 27
Sec. 2 & 11 of T.10S., R.19E.
Sec. 9 of T.10S., R.20E.
Uintah County, Utah

Dear Ms. Flansburg:

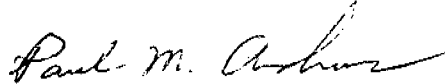
We have reviewed your requests for NTL-2B water disposal facilities at the three above mentioned wells. At the Island Unit No. 25 well on Lease U-4481, your request is approved subject to the guidelines and requirements provided for in Section V, NTL-2B.

At the Island Unit No. 26 well on Lease ML-11004, the State of Utah Division of Oil, Gas and Mining has NTL-2B jurisdiction. The pit location is quite close to a dry wash of moderate size and the pit is partially in fill material. You should contact the State of Utah Division of Oil, Gas and Mining with regard to your application for this well.

At the Island Unit No. 27 well on Lease U-013768, we request that the pit No. 1 be clay lined as a condition for approval due to its proximity to Willow Creek. When this pit is appropriately lined, then your request will be approved subject to the guidelines and requirements provided in Section V, NTL-2B.

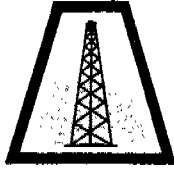
As part of the requirements for the approval of the pits at Island Unit No. 25 and the conditional approval of the pits at Island Unit No. 27, the fences are to receive regular maintenance.

Sincerely,

A handwritten signature in cursive script, appearing to read "Paul M. Andrews".

Paul M. Andrews
Area Manager
Bookcliffs Resource Area

cc: John Baza
Utah Div. of Oil, Gas, & Mining
Salt Lake City, Utah



WEXPRO COMPANY

625 CONNECTICUT AVENUE • P.O. BOX 1129 • ROCK SPRINGS, WYOMING 82901 • (307) 362-5611

January 5, 1987

Bureau of Land Management
Division of Mineral Resources
Branch of Fluids
170 South 500 East
Vernal, UT

RECEIVED
MAY 07 1987

**DIVISION OF
OIL, GAS & MINING**

Re: Island Unit Well No. 26
SE SE 2-10S-19E
Uintah County, Utah
Lease No. ML-11004

Gentlemen:

Pursuant to the requirements of NTL-2B, Wexpro Company hereby applies for approval of the disposal of produced water into two unlined pits. This application is based on NTL-2B (IV) (4), in that the volume of water to be disposed of does not exceed five (5) barrels per day on a monthly basis. As required, the following information is submitted:

1. Quantity produced: 5 BWP, Pit No. 1
Trace BWP, Pit No. 2
2. Refer to attached map showing pit; source is the Wasatch formation.
3. Evaporation rate compensated for annual rainfall: 36" per year.
4. Estimated percolation rate: 46" per year.
5. Usable water aquifer: refer to report by Mountain Fuel dated September 2, 1986 entitled "Usable Water Aquifer Study" on file with the BLM, Vernal District Office.

If you have any questions or require further information, please give me a call.

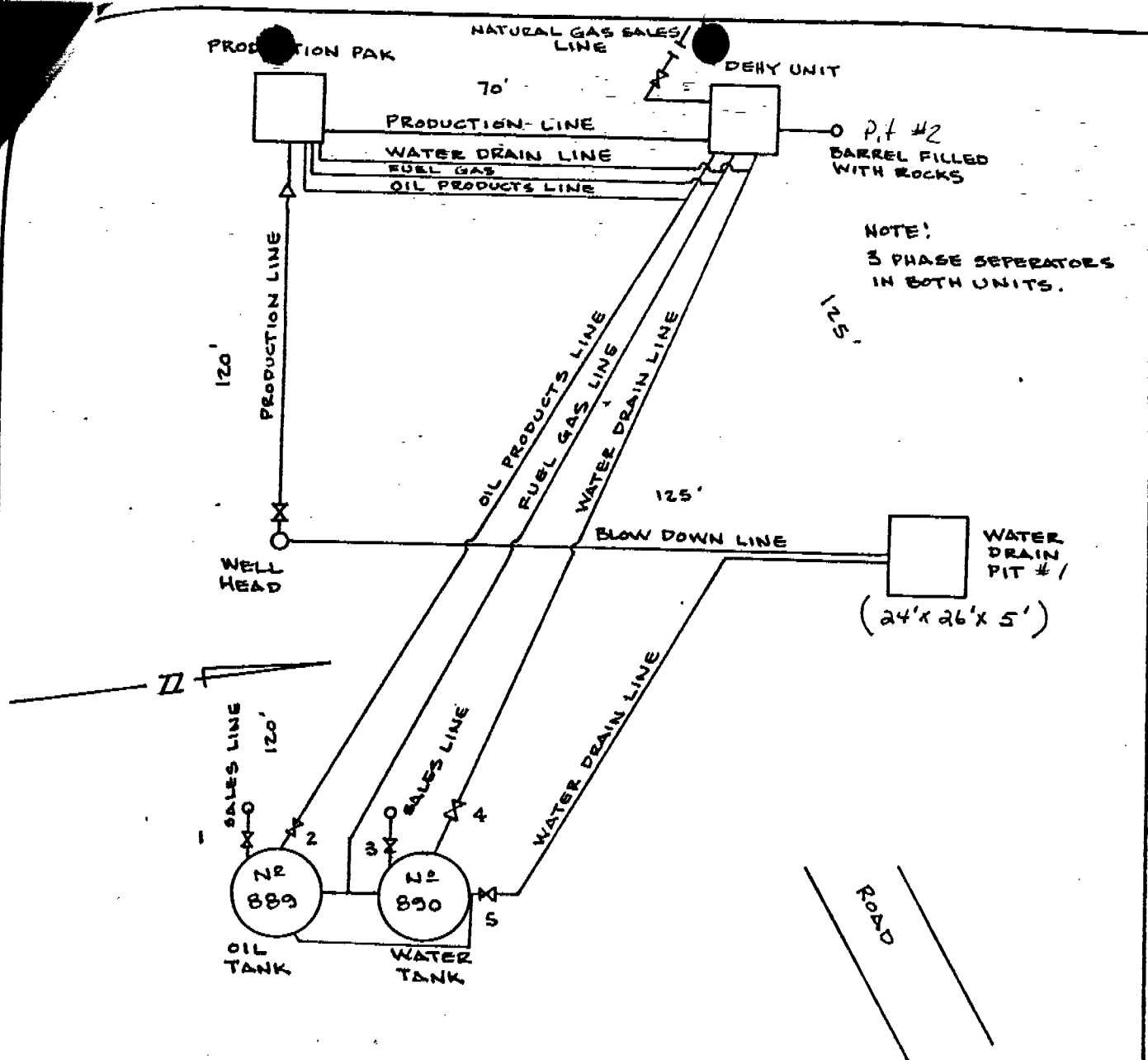
Respectfully,

Cathy J. Flansburg
Cathy J. Flansburg
Regulatory Affairs Technician

Attachment

cc: J. L. Ingerson
S. R. Brause

5401
82-01-59-A



LEGEND

- |— GAS METER
- > CHOKE
- X— VALVE
- O— SEAL
- INTERMITTENT WATER VAPOR LINE

VALVE NO.	PROD.	SALES	VALVE NO.	PROD.	SALES
1	CLOSED	OPEN			
2	OPEN	CLOSED			
3	CLOSED	OPEN			
4	OPEN	CLOSED			
5	CLOSED	CLOSED			

OPERATOR: Wexpro Company

LEASE NO.: ML-11004

TYPE: STATE

NAME: ISLAND UNIT WELL No 26

SEC. 2

T. 10 S.

R. 10 E.

COUNTY: UTAH

STATE: UTAH

INITIAL PRODUCTION: DECEMBER 1986

SITE SECURITY DIAGRAM

ISLAND UNIT WELL No 26

DRAWN: 1/2/87 CRW

SCALE: NONE

CHECKED:

DRWG.

NO.

25392

APPROVED:



United States Department of the Interior

BUREAU OF LAND MANAGEMENT
VERNAL DISTRICT OFFICE
170 SOUTH 500 EAST
VERNAL, UTAH 84078



031813

IN REPLY REFER TO:

3162.32

UT08581

Oil and Gas

ML-11004,

U-013768,

U-4482,

U-4484

RECEIVED
FEB 22 1988

DIVISION OF
OIL, GAS & MINING

COPY

Ms. Cathy J. Flansberg
Coordinator Regulatory Affairs
Wexpro Company
625 Connecticut Avenue
P.O. Box 458
Rock Springs, Wyoming 82902

Re: Request for NTL-2B Application Status
Island Unit Wells ~~17~~, ~~18~~, ~~26~~, and ~~29~~
in Sec. 2, T.10S., R.19E;
Wells ~~19~~, ~~22~~, and ~~32~~
in Sec. 8 and 9 T.10S., R.20E;
Well ~~30~~ in Sec. 12, T.10S., R.19E.
Uintah County, Utah

Dear Ms. Flansberg:

We have reviewed the status of your applications for NTL-2B water disposal facilities for the above wells as you requested in your letter of January 12, 1988. The pit at the Island Unit Well No. 22 was approved in a letter to your office dated August 8, 1986. The pit at Well No. 19 was recently inspected and found to be adequate. It is approved subject to the guidelines and requirements provided for in Section V, NTL-2B.

Requests for unlined water disposal pits at Island Unit Wells No. 20 and No. 32 were denied in a letter to your office dated March 13, 1987. This letter indicated that pits at these two locations should be lined. Please notify this office when these pits have been lined and what lining material was used. We will then inspect the pits for NTL-2B approval as soon as schedules permit.

The Island Unit Wells No. 17, 18, 26, and 29 all on Lease ML-11004 are under the jurisdiction of the State of Utah, Division of Oil, Gas, and Mining for NTL-2B approval. You should contact the State of Utah, Division of Oil, Gas, and Mining regarding your applications for NTL-2B approval for these wells.

If you have questions on the above please contact Keith Chapman or Jim Piani at (801) 789-1362.

Sincerely,

For Karl J. Wright
Paul M. Andrews
Area Manager
Bookcliffs Resource Area

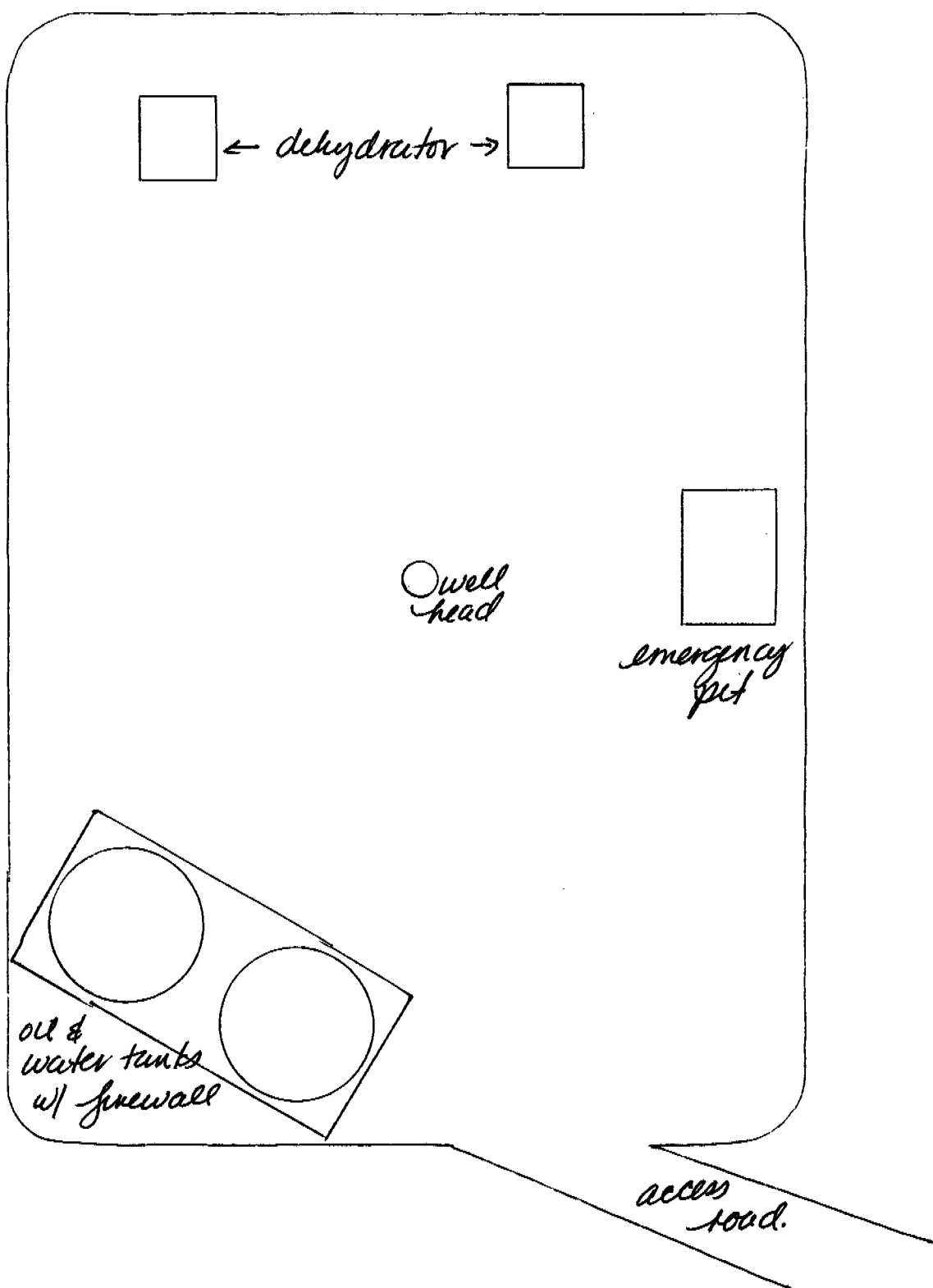
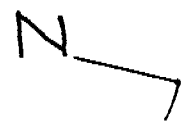
cc: Jim Baza
State of Utah
Division of Oil, Gas, and Mining
355 West North Temple
3 Triad Center, Suite 350
Salt Lake City, Utah 84180-1203

N1070

#22 43-047-31632-SGW/WSTC
#19 43-047-31633-SGW/WSTC
#17 43-047-31503-SGW/WSTC
#29 43-047-31752-SGW/WSTC
#30 43-047-31749-SGW/WSTC
#26 43-047-31701-SGW/WSTC
#18 43-047-31502-SGW/WSTC
#32 43-047-31751-SGW/WSTC

10519E2

42-381 50 SHEETS 5 SQUARE
42-382 100 SHEETS 5 SQUARE
42-383 200 SHEETS 5 SQUARE
NATIONAL



STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

5. LEASE DESIGNATION AND SERIAL NO.

ML-11004

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug-back to a different reservoir.
Use "APPLICATION FOR PERMIT-" for such proposals.)

1.

OIL WELL ☐ GAS WELL ☒ OTHER

7. UNIT AGREEMENT NAME

ISLAND

2.

NAME OF OPERATOR

WEXPRO COMPANY

8. FARM OR LEASE NAME

UNIT

3.

ADDRESS OF OPERATOR

P. O. BOX 458, ROCK SPRINGS, WY 82902

PHONE NUMBER

(307) 382-9791

9. WELL NO.

26

4.

LOCATION OF WELL (Report location clearly and in accordance with any State requirements*)

See also space 17 below.)

At surface

SE SE, 497' FEL, 755' FSL

10. FIELD AND POOL, OR WILDCAT

ISLAND

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

2-10S-19E

14.

PERMIT NO.

43-047-31701

15.

ELEVATIONS (Show whether DF, RT, GR, etc.)

GR 4987'

KB 5001.75'

12. COUNTY OR PARISH

UINTAH

13. STATE

UTAH

16.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐

FRACTURE TREAT

☐

SHOOT OR ACIDIZE

☐

REPAIR WELL

☐

(Other) CHANGE FACILITIES

PULL OR ALTER CASING

☐

MULTIPLE COMPLETE

☐

ABANDON*

☐

CHANGE PLANS

☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐

FRACTURE TREATMENT

☐

SHOOTING OR ACIDIZING

☐

(Other)

REPAIRING WELL

☐

ALTERING CASING

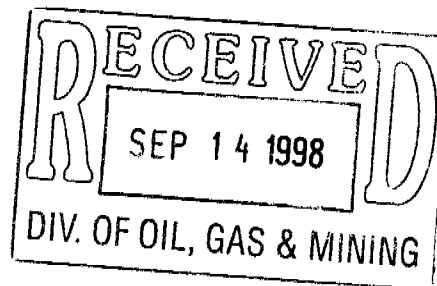
☐

ABANDONMENT*

☐(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17.

DESCRIBE PROPOSED OR COMPLETED OPERATIONS. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Wexpro Company proposes to install a blow down tank at the above location and close the earthen pit.
Please refer to the attached schematic.APPROVED BY THE STATE
OF UTAH DIVISION OF
OIL, GAS, AND MININGDATE: 9-16-98BY: [Signature]

18. I hereby certify that the foregoing is true and correct

SIGNED

[Signature]TITLE G. T. NIMMO, OPERATIONS MANAGERDATE 09/08/98

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

LEGEND

- |— GAS METER
 —◁— CHOKE
 —◇— VALVE
 —○— SEAL
 - - - - - INTERMITTENT WATER VAPOR LINE

VALVE NO.	PROD.	SALES
1	CLOSED	OPEN
2	OPEN	CLOSED
3	CLOSED	OPEN
4	OPEN	CLOSED
5	CLOSED	CLOSED

REV. 1/15/87

SITE SECURITY DIAGRAM

ISLAND UNIT WELL N° 26

OPERATOR: MOUNTAIN FUEL RESOURCES, INC.

LEASE NO.: ML-11004

TYPE: STATE

NAME: ISLAND UNIT WELL N° 26

SEC. 2 SESE T. 15 R. 15 E.

COUNTY: VINTAH

STATE : UTAH

INITIAL PRODUCTION: DECEMBER 1986

DRAWN: 1/2/87 GRW	SCALE NONE
-------------------	------------

SCALE NONE

CHECKED:

DRWG. NO. 25392

APPROVED:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug-back to a different reservoir.
 Use "APPLICATION FOR PERMIT--" for such proposals.)

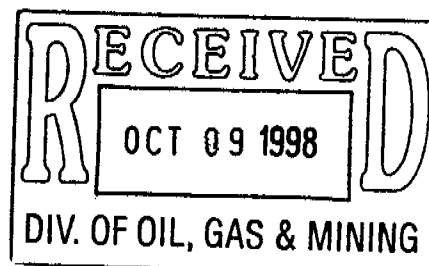
1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. ML-11004	
2. NAME OF OPERATOR WEXPRO COMPANY		6. IF INDIAN, ALLOTTEE OR TRIBE NAME ----	
3. ADDRESS OF OPERATOR P. O. BOX 458, ROCK SPRINGS, WY 82902		7. UNIT AGREEMENT NAME ISLAND	
PHONE NUMBER (307) 382-9791		8. FARM OR LEASE NAME UNIT	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements* See also space 17 below.) At surface SE SE, 497' FEL, 755' FSL		9. WELL NO. 26	
		10. FIELD AND POOL, OR WILDCAT ISLAND	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 2-10S-19E	
14. PERMIT NO. 43-047-31701	15. ELEVATIONS (Show whether DF, RT, GR, etc.) GR 4987' KB 5001.75'	12. COUNTY OR PARISH UINTAH	13. STATE UTAH

16. **Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data**

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other CHANGE FACILITIES)		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Wexpro Company proposes to install a 6' x 6' culvert pit as a tank drain on the production tank on the above location. Please refer to the attached schematic. The pit will have an earthen bottom and an expanded metal lid.



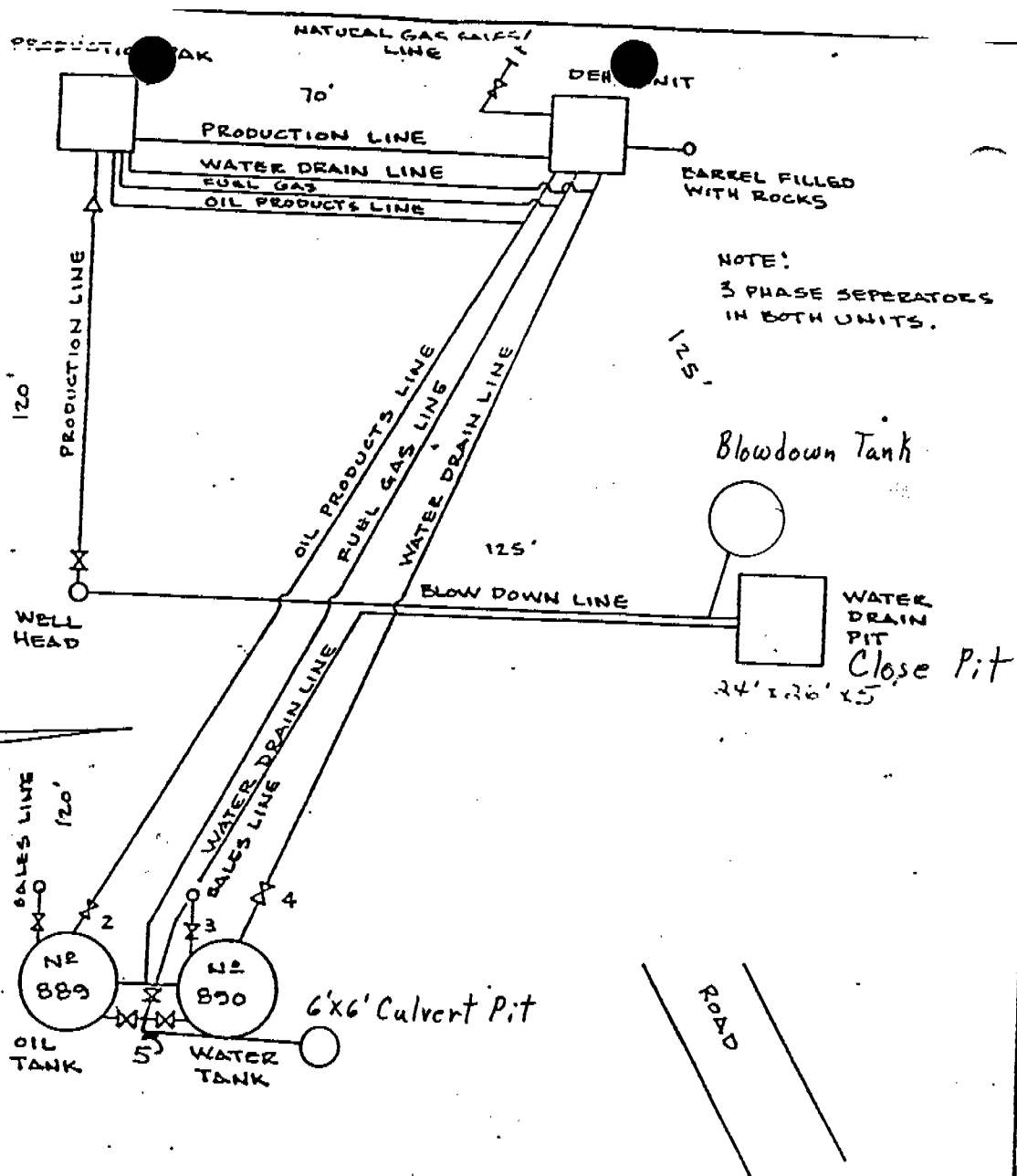
18. I hereby certify that the foregoing is true and correct

SIGNED TITLE G. T. NIMMO, OPERATIONS MANAGER DATE 10/06/98

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:



LEGEND

- |—|— GAS METER
- △— CHOKE
- X— VALVE
- SEAL
- INTERMITTENT WATER VAPOR LINE

VALVE NO.	PROD.	SALES	VALVE NO.	PROD.	SALES
1	CLOSED	OPEN			
2	OPEN	CLOSED			
3	CLOSED	OPEN			
4	OPEN	CLOSED			
5	CLOSED	CLOSED			

REV. 1/15/87

SITE SECURITY DIAGRAM

ISLAND UNIT WELL NO. 26

OPERATOR: MOUNTAIN FUEL RESOURCES, INC.

LEASE NO.: ML-11004

TYPE: STATE

NAME: ISLAND UNIT WELL NO. 26

SEC. 2 SESE

T. 15

R. 15 E.

COUNTY: UTAH

STATE: UTAH

INITIAL PRODUCTION: DECEMBER 1986

DRAWN: 1/2/87 CRW

SCALE: NONE

CHECKED:

DRWG. NO. 25392

APPROVED:

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT -" for such proposals

SUBMIT IN TRIPLICATE

1. TYPE OF WELL

OIL ☐ WELL GAS ☒ WELL ☐ OTHER

2. NAME OF OPERATOR

WEXPRO COMPANY

3. ADDRESS AND TELEPHONE NO.

P. O. BOX 458, ROCK SPRINGS, WY 82902 (307) 382-9791

4. LOCATION OF WELL (FOOTAGE, SEC., T., R., M., OR SURVEY DESCRIPTION)

SEE ATTACHED SHEET

43-697-31701

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

5. LEASE DESIGNATION AND SERIAL NO.

SEE ATTACHED SHEET

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

NA

7. IF UNIT OR CA, AGREEMENT DESIGNATION

ISLAND

8. WELL NAME AND NO.

SEE ATTACHED SHEET

9. API WELL NO.

SEE ATTACHED SHEET

10. FIELD AND POOL, OR EXPLORATORY AREA

ISLAND

11. COUNTY OR PARISH, STATE

UINTAH COUNTY, UTAH

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

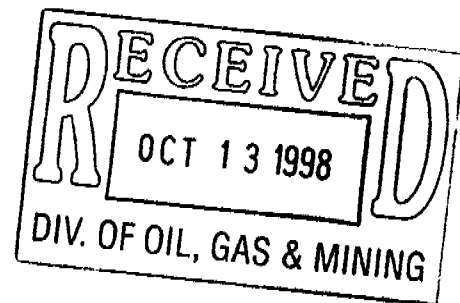
☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other Produced Water Disposal

☐ Change in Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Wexpro Company is required as a Condition of Approval on Sundry Notices approving installation of blowdown tanks on Island Unit Wells No. 21, 25, 26, 27 and 30, to notify the BLM of the name and location of the facility to be used to dispose of produced water. Please note that all excess produced water is hauled by tank truck over Unit, Tribal, County and State roads to the Ace Disposal Pit which is approved by the State of Utah. Attached is a list of all wells in the Island Unit. Produced water from any of these wells may be hauled to the Ace Pit.



14. I hereby certify that the foregoing is true and correct

G. T. Nimmo, Operations Manager

October 9, 1998

Signed

Title

Date

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any:

Title 18 U.S. C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side

WELL NAME and FIELD	API NUMBER	TYPE WELL	LEGAL DESCRIPTION	COUNTY, STATE	UNIT CA PA NUMBER	LEASE NUMBER	PRODUCING FORMATION	BWPD	NTL-2B (CRITERIA)	PIT SIZE	NTL-2B SUBMITTED	NTL-2B APPROVED	SITE-SECURITY REVISED
ISLAND UNIT					891008935A								
UNIT NO. 3	4304715843	WAG	NE SW 8-10S-20E	UINTAH, UT		U-4488	WASATCH	TRACE	4	24X25X4	6-18-84	7-27-84	04-27-95
UNIT NO. 9	4304730488	WAG	C SW 11-10S-19E	UINTAH, UT		U-4481	WASATCH	0.02	4	18X12X4	4-22-80	5-9-80	8-10-90
								TRACE	4	BARREL	5-13-86	6-4-86	
UNIT NO. 11	4304731241	WAG	SE NW 11-10S-19E	UINTAH, UT		U-4481	WASATCH	0.02	4	16X20X6	6-18-84	7-27-84	8-10-90
								TRACE	4	BARREL	5-13-86	6-4-86	
UNIT NO. 12	4304731242	WAG	NE SE 11-10S-19E	UINTAH, UT		U-4481	WASATCH	4.00	4	16X20X5	6-18-84	7-27-84	8-10-90
								TRACE	4	BARREL	5-13-86	6-4-86	
UNIT NO. 13	4304731239	WAG	SE SE 12-10S-19E	UINTAH, UT		U-4484	WASATCH	4.50	4	16X19X8	6-18-84	7-27-84	12-1-87
								TRACE	4	BARREL	5-13-86	6-4-86	
UNIT NO. 14	4304731331	WAG	NE SE 8-10S-20E	UINTAH, UT		U-4488	WASATCH	TRACE	4	BARREL	5-13-86	6-4-86	05-27-98
UNIT NO. 15	4304731330	WAG	SW SE 7-10S-20E	UINTAH, UT		U-4482	WASATCH	0.57	4	12X12X4	6-18-84	7-27-84	8-10-90
								TRACE	4	BARREL	5-13-86	6-4-86	
UNIT NO. 16	4304731505	C/O	NE SW 11-10S-18E	UINTAH, UT		U-013818	GREEN RIVER	1.00	4	24X24X8	3-13-85	8-20-87	3-3-89
								0.25	4	8X10X3	3-13-85	6-20-87	
UNIT NO. 17	4304731503	WAG	SE SW 2-10S-19E	UINTAH, UT		ML-11004	WASATCH	EMRG		12X12X6	6-26-86**	NO ST. RESP.	8-20-90
UNIT NO. 18	4304731502	WAG	SE NW 2-10S-19E	UINTAH, UT		ML-11004	WASATCH	EMRG		12X12X4	6-26-86**	NO ST. RESP.	07-14-98
UNIT NO. 19	4304731633	WAG	SE SW 9-10S-20E	UINTAH, UT		U-013768	WASATCH	EMRG		10X10X8	5-8-86	8-8-86	7-28-88
								TRACE	4	7X28X4	7-14-86	8-8-86	
								TRACE	4	BARREL	7-14-86	8-8-86	
UNIT NO. 20	4304731629	WAG	SW NW 7-10S-20E	UINTAH, UT		U-4482	WASATCH	3.50	4	14X12X8	1-20-86	2-10-86	1-20-88
								TRACE	4	9X8X3	1-20-86	2-10-86	
								TRACE	4	BARREL	1-20-86	2-10-86	
UNIT NO. 21	4304731628	WAG	NW NW 12-10S-19E	UINTAH, UT		U-4484	WASATCH	EMRG		12X12X8	5-8-86	6-4-86	7-28-88
								TRACE	4	11X11X3	5-8-86	6-4-86	
								TRACE	4	BARREL	5-8-86	6-4-86	
UNIT NO. 22	4304731632	WAG	SE SE 9-10S-20E	UINTAH, UT		U-013768	WASATCH	TRACE	4	13X8X5	7-15-86	8-8-86	05-27-98
								TRACE	4	BARRELL	8-22-88	9-15-88	
UNIT NO. 23	4304731631	WAG	NE NE 9-10S-20E	UINTAH, UT		U-013768	WASATCH	3.70	4	16X9X5	7-14-86	8-8-86	1-20-88
								TRACE	4	6X8X4	7-14-86	8-8-86	
								TRACE	4	BARREL	7-14-86	8-8-86	
UNIT NO. 24	4304731630	WAG	SW NW 8-10S-20E	UINTAH, UT		U-4482	WASATCH	1.50	4	11X6X7	1-20-86	2-10-86	1-20-88
								TRACE	4	BARREL	1-20-86	2-10-86	
UNIT NO. 25	4304731702	WAG	NW NE 11-10S-19E	UINTAH, UT		U-4481	WASATCH	TRACE	4	BARREL	1-5-87	4-28-87	8-22-88
								5.00	4	21X23X5	1-5-87	4-28-87	
UNIT NO. 26	4304731701	WAG	SE SE 2-10S-19E	UINTAH, UT		ML-11004	WASATCH	TRACE	4	BARREL	1-5-87**	NO ST. RESP.	8-22-88
								5.00	4	24X26X5	1-5-87**	NO ST. RESP.	
UNIT NO. 27	4304731703	WAG	NE NW 9-10S-20E	UINTAH, UT		U-013768	WASATCH	TRACE	4	BARREL	1-5-87	4-28-87	8-22-88
								5.00	4	16X21X10	11-9-88	12-21-88	
UNIT NO. 29	4304731752	WAG	SE NE 2-10S-19E	UINTAH, UT		ML-11004	WASATCH	TRACE	4	BARREL	2-27-87	3-13-87	07-14-98
								5.00	4	16X16X6	2-17-87	3-13-87	
UNIT NO. 30	4304731749	WAG	NW NE 12-10S-19E	UINTAH, UT		U-4484	WASATCH	TRACE	4	BARREL	2-27-87	3-13-87	12-1-87
								5.00	4	16X16X6	11-9-88	12-21-88	
UNIT NO. 32	4304731751	WAG	SW NE 8-10S-20E	UINTAH, UT		U-4482	WASATCH	TRACE	4	BARREL	2-27-87	3-13-87	10-07-91
								5.00	4	16X16X6	11-9-88	12-21-88	
UNIT NO. 34	4304732962	WAG	NE SE 8-10S-20E	UINTAH, UT		U-4488	WASATCH						05-27-98
UNIT NO. 35	4304732963	WAG	NE SE 8-10S-20E	UINTAH, UT		U-013768	WASATCH						05-27-98
UNIT NO. 36	4304732964	WAG	SE SE 9-10S-20E	UINTAH, UT		14-20-482-391	WASATCH						05-27-98
UNIT NO. 37	4304732966	WAG	NW NW 8-10S-20E	UINTAH, UT		U-4483	WASATCH			NO PIT			05-15-98
UNIT NO. 38	4304733107	WAG	SE SE 12-10S-19E	UINTAH, UT		U-4484	WASATCH			NO PIT			
UNIT NO. 39	4304732967	WAG	NW NW 8-10S-20E	UINTAH, UT		U-4481	WASATCH			NO PIT			
UNIT NO. 41	4304732968	WAG	NW NW 8-10S-20E	UINTAH, UT		U-4483	WASATCH			NO PIT			
UNIT NO. 43	4304732965	WAG	SE SE 9-10S-20E	UINTAH, UT		U-013768	WASATCH						05-15-98
UNIT NO. 44	4304732959	WAG	SW SE 7-10S-20E	UINTAH, UT		U-4483	WASATCH						05-27-98
UNIT NO. 45	4304732960	WAG	SW SE 7-10S-20E	UINTAH, UT		U-4483	WASATCH						05-27-98
UNIT NO. 46	4304732961	WAG	SW SE 7-10S-20E	UINTAH, UT		U-4482	WASATCH						05-27-98
UNIT NO. 50	4304733108	WAG	SE SE 12-10S-19E	UINTAH, UT		U-4482	WASATCH			NO PIT			
UNIT NO. 51	4304733109	WAG	SE SE 12-10S-19E	UINTAH, UT		U-4484	WASATCH			NO PIT			
UNIT NO. 52	4304733110	WAG	SE SE 12-10S-19E	UINTAH, UT		U-4484	WASATCH			NO PIT			
UNIT NO. 53	4304733111	WAG	NE SE 11-10S-19E	UINTAH, UT		U-4481	WASATCH			NO PIT			
UNIT NO. 54	4304733112	WAG	NE SE 11-10S-19E	UINTAH, UT		U-4481	WASATCH			NO PIT			
UNIT NO. 55	4304733113	WAG	NE SE 11-10S-19E	UINTAH, UT		U-4481	WASATCH			NO PIT			

WELL NAME and FIELD	API NUMBER	TYPE WELL	LEGAL DESCRIPTION	COUNTY, STATE	UNIT GA PA NUMBER	LEASE NUMBER	PRODUCING FORMATION	BWPD	NTL-2B (CRITERIA)	PIT SIZE	NTL-2B SUBMITTED	NTL-2B APPROVED	SITE-SECRTY REVISED
UNIT NO. 58	4304733114	WAG	NE SE 11-10S-19E	UINTAH, UT		U-4481	WASATCH			NO PIT			

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

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Use "APPLICATION FOR PERMIT -" for such proposals

SUBMIT IN TRIPLICATE

1. TYPE OF WELL

OIL ☐ WELL GAS ☒ WELL ☐ OTHER

2. NAME OF OPERATOR

WEXPRO COMPANY

3. ADDRESS AND TELEPHONE NO.

P. O. BOX 458, ROCK SPRINGS, WY 82902 (307) 382-9791

4. LOCATION OF WELL (FOOTAGE, SEC., T., R., M., OR SURVEY DESCRIPTION)

SEE BELOW

5. LEASE DESIGNATION AND SERIAL NO.
SEE BELOW

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

N/A

7. IF UNIT OR CA, AGREEMENT DESIGNATION

ISLAND

8. WELL NAME AND NO.

ISLAND UNIT WELLS

9. API WELL NO.

SEE BELOW

10. FIELD AND POOL, OR EXPLORATORY AREA

ISLAND

11. COUNTY OR PARISH, STATE

UINTAH COUNTY, UTAH

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other ELECTRONIC MEASUREMENT

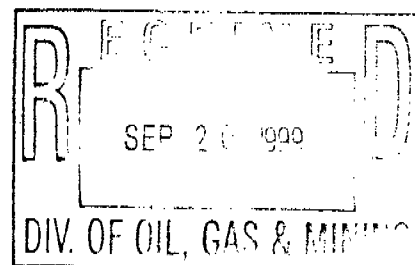
☐ Change in Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

On all wells in the Island Unit, with the exception of Island No. 23, Wexpro intends to install EGM to replace the current gas chart meters. A Fisher ROC model 364/MCU will be installed with the following Rosemount transducers, 3051CG3M52A1AT1, 3051CD2M52A1AT1 and 0444LM1U1A2E5.

See attached for the list of wells to be included in the project.



14. I hereby certify that the foregoing is true and correct

Signed

Title

G. T. Nimmo, Operations Manager

Date

September 16, 1999

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any:

Title 18 U.S. C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side

WELL NAME	PAD NO.	API NUMBER	LEGAL DESCRIPTION	COUNTY, STATE	UNIT CA PA NUMBER	LEASE NUMBER
<u>ISLAND UNIT</u>				Unit Number	891006935A	
UNIT NO. 3		4304715643	NE SW 8-10S-20E	UINTAH, UT		U-4486
UNIT NO. 9		4304730488	C SW 11-10S-19E	UINTAH, UT		U-4481
UNIT NO. 10	8	4304730725	SW SW 12-10S-19E	UINTAH, UT		U-4484
UNIT NO. 11		4304731241	SE NW 11-10S-19E	UINTAH, UT		U-4481
UNIT NO. 12	6	4304731242	NE SE 11-10S-19E	UINTAH, UT		U-4481
UNIT NO. 13	5	4304731239	SE SE 12-10S-19E	UINTAH, UT		U-4484
UNIT NO. 14	3	4304731331	NE SE 8-10S-20E	UINTAH, UT		U-4486
UNIT NO. 15		4304731330	SW SE 7-10S-20E	UINTAH, UT		U-4482
UNIT NO. 16		4304731505	NE SW 11-10S-18E	UINTAH, UT		U-013818
UNIT NO. 17		4304731503	SE SW 2-10S-19E	UINTAH, UT		ML-11004
UNIT NO. 18		4304731502	SE NW 2-10S-19E	UINTAH, UT		ML-11004
UNIT NO. 19		4304731633	SE SW 9-10S-20E	UINTAH, UT		U-013768
UNIT NO. 20	7	4304731629	SW NW 7-10S-20E	UINTAH, UT		U-4482
UNIT NO. 21		4304731628	NW NW 12-10S-19E	UINTAH, UT		U-4484
UNIT NO. 22	4	4304731632	SE SE 9-10S-20E	UINTAH, UT		U-013768
UNIT NO. 24		4304731630	SW NW 8-10S-20E	UINTAH, UT		U-4482
UNIT NO. 25		4304731702	NW NE 11-10S-19E	UINTAH, UT		U-4481
UNIT NO. 26		4304731701	SE SE 2-10S-19E	UINTAH, UT		ML-11004
UNIT NO. 27		4304731703	NE NW 9-10S-20E	UINTAH, UT		U-013768
UNIT NO. 29		4304731752	SE NE 2-10S-19E	UINTAH, UT		ML-11004
UNIT NO. 30		4304731749	NW NE 12-10S-19E	UINTAH, UT		U-4484
UNIT NO. 32		4304731751	SW NE 8-10S-20E	UINTAH, UT		U-4482
UNIT NO. 34	3	4304732962	NE SE 8-10S-20E	UINTAH, UT		U-4486
UNIT NO. 35	3	4304732963	NE SE 8-10S-20E	UINTAH, UT		U-013768
UNIT NO. 36	4	4304732964	SE SE 9-10S-20E	UINTAH, UT		14-20-462-391
UNIT NO. 37	1	4304732966	NW NW 8-10S-20E	UINTAH, UT		U-4483
UNIT NO. 38	5	4304733107	SE SE 12-10S-19E	UINTAH, UT		U-4484
UNIT NO. 39	1	4304732967	NW NW 8-10S-20E	UINTAH, UT		U-4481
UNIT NO. 41	1	4304732968	NW NW 8-10S-20E	UINTAH, UT		U-4483
UNIT NO. 43	4	4304732965	SE SE 9-10S-20E	UINTAH, UT		U-013768
UNIT NO. 44	2	4304732959	SW SE 7-10S-20E	UINTAH, UT		U-4483
UNIT NO. 45	2	4304732960	SW SE 7-10S-20E	UINTAH, UT		U-4483
UNIT NO. 46	2	4304732961	SW SE 7-10S-20E	UINTAH, UT		U-4482
UNIT NO. 50	5	4304733108	SE SE 12-10S-19E	UINTAH, UT		U-4482
UNIT NO. 51	5	4304733109	SE SE 12-10S-19E	UINTAH, UT		U-4484
UNIT NO. 52	5	4304733110	SE SE 12-10S-19E	UINTAH, UT		U-4484
UNIT NO. 53	6	4304733111	NE SE 11-10S-19E	UINTAH, UT		U-4481
UNIT NO. 54	6	4304733112	NE SE 11-10S-19E	UINTAH, UT		U-4481
UNIT NO. 55	6	4304733113	NE SE 11-10S-19E	UINTAH, UT		U-4481
UNIT NO. 56	6	4304733114	NE SE 11-10S-19E	UINTAH, UT		U-4481
UNIT NO. 64	7	4304733304	SW NW 7-10S-20E	UINTAH, UT		U-4482
UNIT NO. 65	7	4304733305	SW NW 7-10S-20E	UINTAH, UT		U-4482
UNIT NO. 66	7	4304733306	SW NW 7-10S-20E	UINTAH, UT		U-4482
UNIT NO. 67	8	4304733307	SW SW 12-10S-19E	UINTAH, UT		U-4484
UNIT NO. 68	8	4304733308	SW SW 12-10S-19E	UINTAH, UT		U-4484

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

FORM 9

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.

1. TYPE OF WELL OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER _____		5. LEASE DESIGNATION AND SERIAL NUMBER: ML-11004
2. NAME OF OPERATOR: Wexpro Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: N/A
3. ADDRESS OF OPERATOR: P.O. Box 458 CITY Rock Springs STATE WY ZIP 82902		7. UNIT or CA AGREEMENT NAME: UTU063026X Island Unit
4. LOCATION OF WELL FOOTAGES AT SURFACE: 755' S. 497' E.		8. WELL NAME and NUMBER: Island Unit 26
QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: SESE 2 10S 19E		9. API NUMBER: 43-047-317 01
COUNTY: Uintah		10. FIELD AND POOL, OR WILDCAT: Island
STATE: UTAH		

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION		
<input type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate) Approximate date work will start: _____	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> REPERFORATE CURRENT FORMATION
	<input type="checkbox"/> ALTER CASING	<input type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> SIDETRACK TO REPAIR WELL
	<input type="checkbox"/> CASING REPAIR	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> TEMPORARILY ABANDON
	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> TUBING REPAIR
	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> VENT OR FLARE
<input checked="" type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only) Date of work completion: 11/6/2007	<input type="checkbox"/> CHANGE WELL NAME	<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> WATER DISPOSAL
	<input type="checkbox"/> CHANGE WELL STATUS	<input checked="" type="checkbox"/> PRODUCTION (START/RESUME)	<input type="checkbox"/> WATER SHUT-OFF
	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input type="checkbox"/> OTHER: _____
	<input type="checkbox"/> CONVERT WELL TYPE	<input type="checkbox"/> RECOMPLETE - DIFFERENT FORMATION	

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well resumed production on 11/6/2007 at 2:30 PM after being off more than 90 days.

NAME (PLEASE PRINT) <u>G. J. Nimmo</u>	TITLE <u>Operations Manager</u>
SIGNATURE <u>[Signature]</u>	DATE <u>11/8/2007</u>

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DIV. OF OIL, GAS & MINING

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

FORM 9

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.

1. TYPE OF WELL OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER _____		5. LEASE DESIGNATION AND SERIAL NUMBER: ML-11004
2. NAME OF OPERATOR: Wexpro Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: N/A
3. ADDRESS OF OPERATOR: P.O. Box 458 CITY Rock Springs STATE WY ZIP 82902		7. UNIT or CA AGREEMENT NAME: Island Unit UTU063026X
4. LOCATION OF WELL FOOTAGES AT SURFACE: 755' FSL 497' FEL		8. WELL NAME and NUMBER: Island Unit Well No. 26
QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: SESE 2 10S 19E		9. API NUMBER: 4304731701
COUNTY: Uintah		10. FIELD AND POOL, OR WILDCAT: Island
STATE: UTAH		

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION		
<input checked="" type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate) Approximate date work will start: 4/24/2008	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> REPERFORATE CURRENT FORMATION
<input type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only) Date of work completion:	<input type="checkbox"/> ALTER CASING	<input type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> SIDETRACK TO REPAIR WELL
	<input type="checkbox"/> CASING REPAIR	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> TEMPORARILY ABANDON
	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> TUBING REPAIR
	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> VENT OR FLARE
	<input type="checkbox"/> CHANGE WELL NAME	<input type="checkbox"/> PLUG BACK	<input checked="" type="checkbox"/> WATER DISPOSAL
	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> PRODUCTION (START/RESUME)	<input type="checkbox"/> WATER SHUT-OFF
	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input type="checkbox"/> OTHER: _____
	<input type="checkbox"/> CONVERT WELL TYPE	<input type="checkbox"/> RECOMPLETE - DIFFERENT FORMATION	

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

Water produced from the above well will be disposed of in a water / blow down tank as previously approved. Excess water production will be hauled to the following State of Utah approved disposal sites:

R N Industries Inc Sec. 4-2S-2W - Bluebell
LaPoint Recycle & Storage Sec. 12-5S-19E - LaPoint
Dalbo, Inc Sec. 02-6S-20E - Vernal

All excess produced water will be hauled by tank truck over Unit, Tribal, County and State roads.

**Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY**

NAME (PLEASE PRINT) <u>G. T. Nimmo</u>	TITLE <u>Operations Manager</u>
SIGNATURE <u>[Signature]</u>	DATE <u>4/24/2008</u>

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DIV. OF OIL, GAS & MINING